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Med
Annual Report

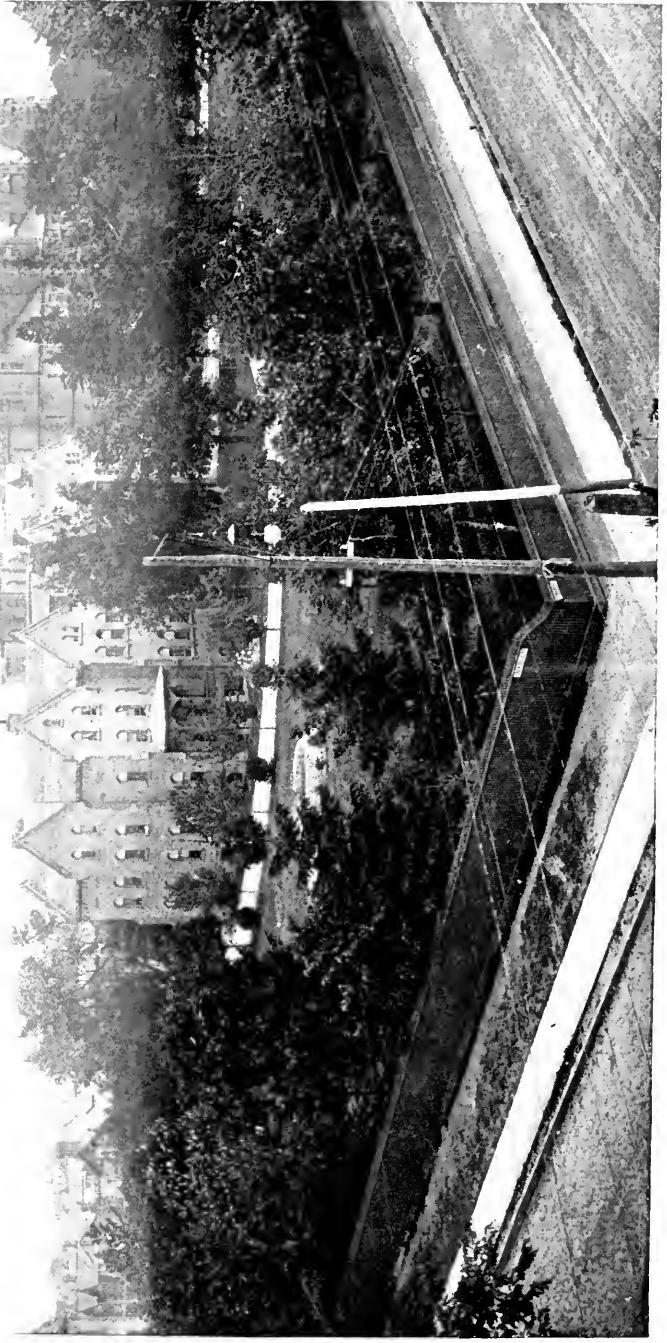
Annual Report

of the

Toronto General Hospital Toronto

FOR THE YEAR ENDING
SEPTEMBER 30TH
1907

1907
1906/7



TORONTO GENERAL HOSPITAL

REPORT
OF THE
TORONTO
GENERAL HOSPITAL

INCLUDING REPORTS OF THE
SUPERINTENDENT, SECRETARY, REGISTRARS
RESIDENT PATHOLOGIST AND
SUPERINTENDENT OF NURSES



ANNUAL REPORT
For the Year ending 30th September
1907

Trustee Board.

Appointed by the Government of Ontario (until Jan. 31, 1910): Prof. A. B. Macallum, Messrs. Cawthra Mulock and Wm. Mackenzie. (Until Jan. 31, 1909): Eugene O'Keefe, Daniel R. Wilkie, W. J. Douglas. (Until Jan. 31, 1908): Mr. Charles Cockshutt, Dr. J. O. Orr.

Appointed by the University of Toronto: (Until Jan. 31, 1908): The Chairman of the Board of Governors, Dr. John Hoskin, K.C.; the President of the University of Toronto, Dr. Robt. Falconer. (Until Jan. 31, 1909): Byron E. Walker, Esq., LL.D., Rev. J. A. Macdonald. (Until Jan. 31, 1910); Mr. W. T. White.

Appointed by the City of Toronto: The Mayor, Ald. T. Foster, Controller Dr. W. S. Harrison, Ald. J. J. Graham, Ald. James H. McGhie.

Elected by the Subscribers: (Until Jan. 31, 1908): J. W. Flavelle, Esq., LL.D., and Mr. W. E. Rundle. (Until Jan. 31, 1909): Messrs. C. D. Massey and H. C. Cox. (Until Jan. 31, 1910): Messrs. H. H. Fudger, P. C. Larkin, and M. J. Haney.

Chairman—J. W. Flavelle, LL.D. Vice-Chairman—P. C. Larkin, Esq.

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Dr. W. S. Harrison,	M. J. Haney,
Dr. J. O. Orr,	The Mayor,
P. C. Larkin.	

FINANCE COMMITTEE.

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J. W. Flavelle,	P. C. Larkin,

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J. W. Flavelle,	P. C. Larkin.

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 U. Ogden, M.D.
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 F. N. G. Starr, M.B.
 E. E. King, M.D., C.M., Vict.
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 F. W. Marlow, M.D., F.R.C.S., Eng.

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K. C. McIlraith, M.B., F.O.S., Edin.

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H. J. Hamilton, M.B., L.R.C.P.
J. J. Mackenzie, B.A., M.B.
A. H. W. Caulfeild, M.B. (Resident).

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George Elliott, M.D., C.M.
D. McGillivray, M.B., M.R.C.S., L.R.C.P.

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B. Z. Milner, M.D., C.M.
T. B. Richardson, M.D., F.R.C.S., Edin.
E. S. Ryerson, M.D., C.M.

Annual Report of the Toronto General Hospital.

ANAESTHETISTS.

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 Samuel Johnston, M.A., M.D.

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 G. W. Howland, B.A., M.B., M.R.C.P., Lond.

NERVOUS WARDS.

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TUBERCULOSIS CLINIC.

Harold C. Parsons, M.A., M.D., M.R.C.P.

DEPARTMENT OF IMMUNIZATION AND MEDICAL RESEARCH.

G. W. Ross, M.A., M.B., M.R.C.S., M.R.C.P., Eng.

Resident Staff.

(September 30th, 1907.)

G. S. Strathy, M.D., C.M.
 C. E. Spence, M.B.
 J. A. Kinnear, M.D., C.M.
 A. W. Beattie, M.D.
 R. B. Burwell, M.B.
 D. H. Boddington, M.B.
 F. V. Hamlin, M.B.
 A. G. Wallis, M.B.
 E. C. Dickson, B.A., M.B.
 J. C. Masson, M.B.
 W. A. Lewis, M.D.C.M.
 A. S. Moorehead, M.B.
 R. J. MacMillan, M.B.
 A. H. Rolph, B.A., M.B.
 D. E. Robertson, M.B. (in charge of Clinical Laboratory).

Other Officers.

Apothecary.....Dr. Newell
 Admitting Officer.....R. G. Jones
 Steward.....H. Service
 Engineer.....Wm. Bryant
 Gardener.....John Ede
 Carpenter.....Thos. Ryves
 Painter.....Wm. Hamilton

Training School.

Superintendent of Training School.....Miss Mary Agnes Snively.
Third Assistant.....Miss Margaret Cringle.
Night Supervisor.....Miss Annie Hartley.

Graduate Nurses in Charge of Departments.

Burnside (Maternity).....Mrs. Effie Feeny.
Gynaecological.....Miss Annie Scadding.
Eye and Ear.....Miss Kate Mitchell.
Private Wards.....Miss Agnes Baldwin.
Operating Theatre Miss Evangeline Thorpe.
First AssistantMiss Alice E. Stewart.
Second Assistant.....Miss Jessie Scott.

Ex-Members of the House Staff.

Graduates in Medicine who have held positions on the Resident Staff of the Toronto General Hospital since 1870, as House Physi-

cians and House Surgeons:

- 1871-2—A. M. Taylor, Goderich.
- 1872-3—R. H. Robinson, 163 Wilton Avenue, Toronto.
T. J. Abbott, Pomeroy, Mich.
- 1872-4—R. B. Nevitt, Bloor Street, Toronto.
- 1875-6—David M. Fisher. Deceased.
Stewart McArton. Deceased.
- 1876-7—D. L. Stewart, Teeswater, Ont.
Geo. A. Langstaff. Deceased.
W. G. Stark. Deceased.
- 1877-8—Wm. Honeywell, New Glasgow, Nova Scotia.
Gerald O'Reilly, Guelph, Ont.
- 1878-9—Gerald O'Reilly, Guelph, Ont.
J. W. Lesslie, 1 St. Patrick Street, Toronto, Ont.
W. Lehmann, 164 Spadina Avenue, Toronto, Ont.
J. F. W. Ross, 481 Sherbourne Street, Toronto, Ont.
R. A. Ross. Deceased.
R. M. Stephen, Collingwood, Ont.
- 1879-80—Hon. R. A. Pyne, 33 River Street, Toronto, Ont.
T. J. Park, Amherstburg, Ont.
- 1880-1—C. S. Beck, Port Arthur, Ont.
D. A. Bowlby, Simcoe, Ont.
J. H. Radford, Galt, Ont.
G. B. Smith, 92 College Street, Toronto, Ont.
T. B. Stark, 21 Carlton Street, Toronto, Ont.
W. J. Charlton, Weston, Ont.
- 1881-2—Lesslie Sweatnam. Deceased.
W. M. MacDonald. Deceased.
- 1882-3—Edward P. Wood. Deceased.
James F. Bell, Portland, Oregon.
G. S. Cleland, 730 Queen Street East, Toronto, Ont.
M. R. Casgrain, Windsor, Ont.
- 1883-4—B. H. Scott, Imperial Military Service, Peterboro', Ont.
J. S. Draper. Deceased.
J. W. Patterson. Deceased.
T. D. Meikle, Mount Forest, Ont.
- 1884-5—Horace Bascom, Uxbridge, Ont.
J. Earle Jenner, Kingsville, Ont.
J. M. Cochrane, London, England.
H. S. Martin, Spokane Falls, Wash., U.S.
- 1885-6—Geo. A. Peters. Deceased.
P. E. Doolittle, 180 Sherbourne Street, Toronto, Ont.
H. J. Hamilton, 329 Church Street, Toronto, Ont.
Chas. Trow, 57 Carlton Street, Toronto, Ont.
Chas. J. Hodgetts.
John Macoun, Campbellford, Ont.
- 1886-7—H. C. Scadding, 182 Bloor Street, Toronto, Ont.
W. P. Caven, 70 Gerrard Street, Toronto, Ont.
F. Winnett, 525 Sherbourne Street, Toronto.
C. W. Dow, Owen Sound, Ont.
Wm. A. Richardson, Seward, Alaska.
- 1887-8—D. A. Dobie, New York, U.S.
W. A. Shannon, Seattle, Wash.
W. O. Stewart, Guelph, Ont.
W. D. Scott, Peterboro', Ont.
George A. Acheson, Galt, Ont.
Elias Clouse, 468 College Street, Toronto, Ont.

- 1888-9—W. C. Barber, Rockwood Hospital, Kingston, Ont.
A. E. Ardagh, Orillia, Ont.
T. P. Weir. Deceased.
F. P. Cowan. Deceased.
C. B. Langford, Blenheim, Ont.
F. G. Thomson, St. Joseph, Mt.
- 1889-90—H. W. Armstrong, Fergus, Ont.
H. A. Turner, Millbrook, Ont.
J. M. McFarlane, 32 Carlton Street, Toronto, Ont.
J. H. Collins. Deceased.
Edward Meek, Port Rowan, Ont.
H. A. Yeomans, Belleville, Ont.
- 1890-1—L. F. Barker, Baltimore, Md.
Thos. Cullen, Johns Hopkins University, 3 W. Preston Street,
Baltimore, Md.
Chas. F. McGillivray, Whitby, Ont.
R. M. Hillary, Aurora, Ont.
Roland Hill, St. Louis, Mo., U.S.A.
Owen E. McCarty. Deceased.
- 1891-2—W. N. Barnhardt, State Hospital, Central Islip, L.I., N.Y.
G. Boyd, 167 Bloor Street East, Toronto, Ont.
J. A. Amyot, Toronto University, Toronto, Ont.
James Third, Kingston, Ont.
C. A. Temple, 200 Spadina Avenue, Toronto, Ont.
W. D. D. Herriman, Chicago, Ill.
- 1892-3—H. C. Parsons, 72 Bloor Street West, Toronto, Ont.
F. Fenton, 75 Bloor Street East, Toronto, Ont.
H. J. Way, Chicago, Ill., U.S.
H. B. Anderson, 34 Carlton Street, Toronto.
H. A. Bruce, 64 Bloor Street East, Toronto, Ont.
J. N. E. Brown, General Hospital, Toronto, Ont.
T. H. Middleboro, Owen Sound, Ont.
A. S. Tilley, Bowmanville, Ont.
- 1893-4—T. E. South. Deceased.
J. N. Harvie, Orillia, Ont.
T. B. Fitcher, Baltimore, Md.
J. Barker Peters. Deceased.
Chas. H. Bird, Gananoque, Ont.
Wm. Glaister, Wellesley, Ont.
E. Tomlinson, 404 E. 43rd Street, Chicago, Ill., U.S.
F. J. Burrows, Seaforth, Ont.
- 1894-5—W. J. McCollum, 168 Jarvis Street, Toronto, Ont.
C. B. Shuttleworth, 45 Bloor Street East, Toronto, Ont.
J. P. Sinclair, Gananoque, Ont.
D. J. Armour, 89 Harley Street, W. London, Eng.
John Crawford, Esmond, N.D., U.S.
C. D. Parfitt, Gravenhurst, Ont.
T. G. Devitt, Grand Forks, N.D., U.S.
G. H. Field, Cobourg, Ont.
- 1895-6—W. J. Chapman, Kenora, Ont.
J. Sheahan, St. Catharines, Ont.
T. McCrae, 807 St. Paul Street, Baltimore, Md.
Arthur A. Small, 100 State Street, Chicago, Ill.
A. C. Lambert, Amoy, China.
A. C. Lamont.
F. S. Harris, Condo, N.D., U.S.
F. D. Vaux, Ottawa, Ont.
- 1896-7—J. A. Rennie, Chatham, Ont.
C. Graef, New York, U.S.
S. H. Westman, 630 Spadina Avenue, Toronto.
W. J. Malloch, 327 College Street, Toronto.
W. H. Weir, Yonge Street, Toronto, Ont.

- J. J. Elliot. Deceased.
 C. H. Brereton, Chesley, Ont.
 A. A. Beatty, 201 Bloor Street, Toronto.
- 1897-8—R. Nichol, Cornwall, Ont.
 J. H. Mullin, Hamilton, Ont.
 G. Royce, College St., Toronto.
 W. F. Mayburry, Ottawa, Ont.
 J. S. McEachern, Calgary, Alta.
 F. A. Scott, Seattle, Wash.
 R. W. Large, Bella Bella, B.C.
 R. W. Perry, Fort William, Ont.
- 1898-9—Harold Anderson, Fort William, Ont.
 John McCrae, 190 Peel Street, Montreal, Que.
 Donald McGillivray, 62 College Street, Toronto.
 G. A. Sutherland, Embro, Ont.
 W. C. White, Pittsburg, Pa.
 F. H. Bethune, Emo, Ont.
 W. E. Graham, Calgary, Alta.
 Norman E. Farewell, Oshawa, Ont.
 C. M. Stewart, Ailsa Craig, Ont.
 Thomas Bradley, Sarnia, Ont.
- 1899-1900—W. H. Spence. Deceased.
 A. D. Stewart, Fort William, Ont.
 Marshal B. Dean, Fort William, Ont.
 A. A. Shepard, Sault Ste. Marie, Ont.
 F. Turnbull. Deceased.
 Colin Campbell, Toronto, Ont.
 C. A. Page, Kingsville, Ont.
 G. A. Schmidt, Cobalt, Ont.
 E. Baker, Keewatin, N.W.T.
 R. S. Broad, Listowel, Ont.
- 1900-1—E. D. Carter, Vancouver, B.C.
 J. Gow, Windsor, Ont.
 G. C. Howland, 540 Spadina Avenue, Toronto.
 A. C. Hendrick, 323 College Street, Toronto.
 A. J. Mackenzie, Carlton Street, Toronto.
 W. K. Kerr, Elora, Ont.
 G. H. McLarren, Hamilton, Ont.
 A. T. Staunton, Tropical School of Medicine, London, Eng.
 R. H. Small, New Hamburg, Ont.
 E. Weir, Tropical School of Medicine, London, Eng.
- 1901-2—F. A. Cleland, 444 W. 44th Street, New York, U.S.
 H. S. Hutchison, 317 Sherbourne Street, Toronto.
 J. H. Trout. Deceased.
 Duncan Anderson, 241 Wellesley Street, Toronto.
 Jarvis E. Martin, Langton, Ont.
 W. J. Macdonald, St. Catharines, Ont.
 W. G. Colliston, Lindsay, Ont.
 Joseph Jordan, Meaford, Ont.
 Helen MacMurchy, Toronto, Ont.
- 1902-3—J. D. Chisholm, Fort William, Ont.
 C. R. Elliott.
 S. Johnson, 169 Carlton Street, Toronto.
 R. Neil Kyles, Orangeville, Ont.
 H. Lowry, Port Arthur, Ont.
 R. A. Mullin, Minneapolis, Minn., U.S.
 J. R. McCollum, London, Eng.
 R. Parsons, Red Deer, Alta.
 A. E. Rutherford, Owen Sound, Ont.
 P. W. Saunders, New York, N.Y., U.S.
 G. W. Ross, Jarvis and Charles Streets, Toronto
- 1903-4—W. A. Cerswell, Toronto.

- Jos. Graham, 55 College Street, Toronto.
N. T. McDaurin, Lancaster, Eng.
E. M. Walker, St. George Street, Toronto.
A. D. Wright, 30 Gerrard Street, Toronto.
Edgar Brandon, North Bay, Ont.
R. W. Irving, Gananoque, Ont.
M. T. Harris, Glencoe, Ont.
W. A. McCauley, Copper Cliff, Ont.
H. Rundle, Milford, Ont.
- 1904-5—A. F. Fraleigh, Broadview Avenue, Toronto.
J. W. Rowntree, Thistletown, Ont.
R. O. Fisher, Oakville, Ont.
E. R. Cullen, Johns Hopkins, Baltimore, Md.
J. A. Oille, Byng Inlet, Ont.
G. E. Smith, King Street, Toronto.
W. E. Gallie, 169 College Street, Toronto.
C. H. Hair, Cobalt, Ont.
G. E. Greenway, Coldwater, Ont.
W. B. Hendry, Carlton and Ontario Streets, Toronto.
H. R. Elliott, New Sarum, Ont.
A. W. Canfield, 636 Bathurst Street, Toronto, Ont.
W. S. Fawnes, Brock Avenue and College Streets, Toronto.
N. H. Sutton, Omemee, Ont.
M. H. Embree, Parkdale, Toronto, Ont.
- 1905-6—E. C. Burson, Dr. Meyers Hospital, Deer Park, Toronto, Ont.
A. G. McPhedran, Stroud, Ont.
A. Adams, Gravenhurst Sanitarium, Gravenhurst, Ont.
T. Alexander Davies, 56 Wellesley Street, Toronto, Ont.
Frederick Brodies, Cobalt, Ont.
W. A. Burr, London, Eng.
A. McNally, Berlin, Ont.
A. H. W. Caulfeild.
- 1906-7—J. H. Soady.
F. J. Buller, Latchford, Ont.
J. H. Kidd, Claremont, Ont.
F. W. Rolph, Toronto.
George Archer, India.
Henry Glendinning, Toronto.
W. S. Lemon, Parry Sound, Ont.
D. A. L. Graham, Pittsburg, Pa.
K. H. VanNorman, London, Eng.
Walter Wright, Toronto.

Benefactors of the Toronto General Hospital.**NOT INCLUDED IN BUILDING FUND LIST.**

1861 Alex. Sanderson	\$ 500 00
1867 George Michie	2,000 00
1869 John G. Walker	500 00
1871 George Henry	2,000 00
1875 James Ferrier Gentle, Montreal	5,000 00
1875 Erland Erlandson, Port Hope	15,000 00
1878 William Gooderham, Sr.	4,500 00
1878 James G. Worts	4,500 00
1878 William Cawthra	4,500 00
1882 William Gooderham, Jr.	2,000 00
1883 John Macdonald	1,000 00
1883 Henry Gooderham	500 00
1884 James Michie	5,000 00
1886 Margaret I. Roaf	1,000 00
1886 The R. B. Butland Bequest	14,000 00
1887 Alexander McGregor	500 00
1889 John B. Lloyd	1,000 00
1890 James E. Drinkwater	1,500 00
1891 George Davison	1,500 00
1891 Hon. John Macdonald	4,000 00
1891 Rev. Father T. C. McMahon	2,800 00
1892 Alex. T. Fulton	5,000 00
1893 Henry Buck (Salem, N.H.)	1,000 00
1898 Jane Porter.....	3,000 00
1898 William Warren	1,000 00
1898 Toronto Railway Company	1,000 00
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1904 Charles Cockshutt	1,000 00
1905 Canadian Benevolent Protective Order of Elks, Toronto Lodge	2,000 00
1905 George W. Lewis	8,500 00
1906 James F. W. Ross	500 00
1906 Canadian Pacific Railway	500 00
1906 M. J. Haney.....	500 00
1907 Reuben Stevens	500 00
1907 John Foote	1,000 00

ANNUAL REPORT

OF THE

TORONTO GENERAL HOSPITAL

Superintendent's Report

October 1st, 1907.

*J. W. Flavelle, Esq., LL.D., Chairman of the Board of Trustees of
The Toronto General Hospital:*

SIR,—I have the honor to transmit for the information of the Board a review of the work of the past year, as follows:

Patients.

The year 1906-'07 was the busiest in the history of the Hospital. The largest number of patients we had on any one day was 369; (in fact, the largest number we ever had); the lowest 235; the average, a fraction under 300.

The number of births during the years was..196
The number of deaths (adult) was309
The number of deaths (infant) was 5

The number of operations during the year was as follows:

In the Main Theatre 961
In the Pavilion Operating Room 285
In the Eye and Ear Department..... 127
In the Nose and Throat Department 113
In the Obstetrical Department 55

Total.....1,541

The attendance at the Out-patient Department was as follows:

Surgery 474
Medicine 499
Nose and Throat 221
Eye and Ear 690
Gynæcology 21
Skin 51
Tuberculosis 44

Total2,000

The average number of days' stay per patient was 23.3.

The approximate per capita daily cost was \$1.38.

Ward Rates.

In the month of August the several general hospitals in Toronto made application to the City Council to pay \$4.90 per week instead of \$3.50 for patients admitted to the Hospital with city orders. The Medical Health Officer objecting to the increase, a second communication was sent from the committee in September. At this date the Council has not agreed to the increase. In the meantime, we have been charging \$4.90 per week to patients who have been paying for themselves in these wards.

By referring to the financial statement, it will be seen that our income from private ward patients for the hospital year just closed exceeded the income of the previous year from the same source by \$10,278.02. This was due largely to the increased rates charged private ward patients.

Immunization Department.

One of the most important features of the year's work has been the establishment of the Department of Immunization, in charge of Dr. G. W. Ross. A report of his work will be found on another page. The expenses for the initial year, including his salary, will amount to about \$1,900.00. This expenditure was not included in the estimates for the year.

Nervous Wards.

The Nervous Wards have been well occupied during the year. The results therefrom have been very satisfactory, as will be seen by a perusal of the attached report of Dr. Campbell Meyers, physician-in-charge.

Out-Clinic for Pulmonary Tuberculosis.

The work of the out-patient clinic for cases of pulmonary tuberculosis has been continued during the year. The City Council since the month of July has been paying the nurse. This effects a saving of \$540.00 per year to the Hospital. There were 72 cases treated at the Clinic, 42 of which were new cases. Of the 42 new cases, 14 have improved, 13 are practically unchanged, 9 losing ground, and 6 have died. One case appears to have recovered. Four of the patients were sent to sanatoria, 3 were sent back to their homes in the Old Country, and 4 cases were admitted to our own hospital for emergent treatment. The number of houses disinfected at the instance of the nurse was 20. The number of visits paid by the nurse was 878. She dispensed to the patients 985½ quarts of milk and 256½ dozens of eggs. The attention of the nurse has been very much appreciated by the patients and their families. Arrangements have been made with

Dr. G. W. Ross of the Immunization Department, by which tuberculin is administered as routine treatment.

Changes in Personnel of Staff.

I sincerely regret to record the death of Dr. Geo. A. Peters, one of the senior surgeons. Dr. Peters was a house-surgeon in the General Hospital during the year 1885-86, from which time until his death he had been almost continuously connected with the Hospital. During a brief absence in England he distinguished himself by taking the degree of Fellow of the Royal College of Surgeons. Dr. Peters' work was marked by conscientious devotion to the Hospital. He was beloved by patients, students, nurses, and all officers of the place, who deeply regret his early removal.

Dr. Frederick Marlow, F.R.C.S., was appointed as Assistant Gynecologist in the month of June.

Changes in the House Officers.

During the year the following house officers finished their terms: Dr. G. B. Archer, who has gone as a missionary to India; Drs. Walter Wright, H. Glendinning, and F. W. Rolph, who have commenced practicing in the city; Dr. K. H. Van Norman, who has gone to take a post-graduate course in England; Drs. J. H. Soady, F. J. Buller, J. H. Kidd, and W. S. Lemon, who have settled in various parts of the Province. The following gentlemen have been assigned positions on the House Staff: Drs. A. G. Wallis, D. H. Boddington, F. V. Hamlin, B. Clarke (resigned), E. C. Dickson, R. B. Burwell, J. C. Masson, W. A. Lewis, A. S. Moorehead, A. H. Rolph, R. J. MacMillan. Dr. D. E. Robertson was appointed to the Clinical Laboratory for a term of six months. During the year, Dr. A. H. W. Caulfeild, Resident Pathologist, spent nine months in England and Germany in laboratory and post-mortem work. In his absence, Dr. D. A. L. Graham occupied his position.

Ex-House Staff Association.

While the British Medical Association was in session in Toronto last year, a reunion of ex-house surgeons was held. Dr. R. B. Nevitt, one of the oldest members acted as president. About 100 ex-internes assembled at the Hospital. Addresses were delivered by Professor Lewellys F. Barker, a former house officer, and Sir Victor Horsley. Refreshments were served on the lawn. The second meeting took place on the 27th of May at the King Edward Hotel, under the presidency of Dr. J. F. W. Ross, at which it was decided to hold a yearly meeting. It was further arranged that the ex-house officers resident in Toronto should meet at stated times during the year at the hospital to report any scientific work which they had done and to present clinical cases for discussion. A Historical Committee was also

appointed, the duty of which will be to write a history of the Hospital. The President for the present year is Dr. W. P. Caven.

Hospital Associations.

The American Hospital Association was held at Chicago, during the month of September, a meeting which I found it very profitable to attend. That body will meet in Toronto next year. The trustees of Hospitals are eligible for membership.

On April 1st a meeting of Canadian Hospital Superintendents was convened in the Parliament Buildings. Over 40 superintendents were present and formed themselves into a Canadian Hospital Association. Three of the Provincial Ministers were present. The Honorable Mr. Hanna, Provincial Secretary, was good enough to arrange that the proceedings should be published at the Government expense. Such an association will do useful work in solving hospital problems.

Laundry.

Our Laundry service has given us a considerable amount of harassing annoyance during the year, but, following a re-arrangement by which we pay \$100.00 per month more for the work, considerable improvement has ensued. We are making every effort to see that the work is done well, though we are hampered by reason of the fact that it is not under our immediate control.

Repairs.

The main repairs during the year were as follows: After a thorough inspection of our electrical equipment, it was discovered that a good many alterations required to be made in order to satisfy the Inspector of the Canadian Fire Underwriters' Association. The whole system was gone over by the Rogers Electric Company, and the necessary changes made. The cost to the Hospital amounted to \$270.00. This was an unforeseen expenditure. The elevator plant also required considerable repairing during the year. The cost of this amounted to \$165.00. A steam table and food warmer was put in the House-Surgeons' dining-room, and a new hot water boiler put in the Burnside Lying-in Hospital. A new tank for containing hot water and maintaining the hot water pressure in the hot water system throughout the building was placed in the attic. The tubes of No. 1 boiler required to be replaced, and No. 2 boiler needed repair. In addition to the above, it was necessary to have outside plumbers in to make certain repairs in steam and sewage pipes. On several occasions also it was necessary to engage plasterers to repair patches in walls and ceilings. A granolithic walk was put down to replace the decayed wooden sidewalk leading to the main entrance gate. New cement areas were constructed around the basement windows at the Pavilion, the Nurses' Home, and at the front and rear entrances to the basement at the Burnside. Three

new wards were built in the upper story of the Pavilion and a quiet room in Ward No. 8.

Fire Protection.

After a consultation with the Fire Chief and the City Architect, it was decided to construct seven additional fire escapes. The work has been completed in a satisfactory manner, and makes abundant provision for the escape of the patients in case a fire should occur. The cost of construction, amounting to \$1,400.00, was not included in the year's estimates. Since the month of May a night watchman has been on duty, patrolling those portions of the building which are not under the immediate supervision of night nurses and night orderlies.

Hospitals Visited.

In the month of March a committee of the Board visited New York, Philadelphia, and Baltimore, with a view to ascertaining whether the new hospital should take the form of separate pavilions or be built according to the block system. Accompanying the committee, I had the opportunity of inquiring into methods of administration in the hospitals in these cities. Since that time I have had the privilege of visiting a number of other Philadelphia hospitals; and also of visiting the General Hospital in Buffalo, and eleven of the leading hospitals in Chicago.

Honorary Visitors.

The following are the names of those who, on payment of \$100.00 each for maintenance, were elected as Honorary Visitors to the Hospital for the year. They were invited to visit the hospital in couples, each being assigned a particular week:

Mrs. George Gooderham, Toronto.
Mr. W. R. Brock, Toronto.
Mr. W. G. Gooderham, Toronto.
Mr. J. W. Flavelle, Toronto.
Mr. D. R. Wilkie, Toronto.
Mr. A. E. Kemp, Toronto.
Mr. A. H. Campbell, Toronto.
Mr. J. A. Murray, Toronto.
Mr. W. Barr, Toronto.
Mr. T. Gibson, Toronto.
Dr. John Hoskin, Toronto.
Mr. Widmer Hawke, Toronto.
Mr. Charles Cockshutt, Toronto.
Mr. E. B. Osler, Toronto.
Mr. George Davies, Todmorden, Ont.
Mr. Wilfred Davies, Todmorden, Ont.
Mr. Robert W. Davies, Todmorden, Ont.
Mr. Norman Davies, Todmorden, Ont.
Mr. Melville Davies, Todmorden, Ont.

Mr. Thomas Graham, Claremont, Ont.
Mr. James Acton, Toronto, Ont.
Mr. J. M. Treble, Toronto, Ont.
Mr. Michael McLaughlin, Toronto, Ont.
Mr. James Lumbers, Toronto, Ont.
Mr. John Macdonald, Toronto, Ont.
Mr. John Pugsley, Toronto, Ont.
Mr. George Gillies, Toronto, Ont.
Mr. John Northway, Toronto, Ont.
Mr. A. W. Austin, Toronto, Ont.
Mr. M. J. Haney, Toronto, Ont.
Mr. John T. Ryan, Toronto, Ont.
Mr. E. O'Keefe, Toronto, Ont.

Donations.

We are indebted to the following friends for donations mentioned:

For magazines: From the National Club, per Mr. R. L. Lord; from Mr. Smith, Wellesley Street; from the Anglo-Canadian News Co.; from Mr. P. E. Van Winkle, Lewis Street; from Mr. C. D. Gamble; from Dr. W. Pearson; from Mrs. J. P. Whitney, Isabella Street, and for Easter cards and verses, from John W. Campbell, Gerrard Street.

For 6 barrels of biscuits: from Christie, Brown Co., at Christ-

For flowers: from St. Peter's Sunday School and Mr. Fredk. Gregg; and others.

For repair of House Surgeons' billiard table: \$20.25, from Mr. E. B. Osler.

For Magnet, for Eye and Ear Department: from Dr. J. M. MacCallum.

For \$82.00, for battery for Nervous Wards: from Dr. Campbell Meyers.

For \$150.00, for Nervous Wards: from Mr. R. M. Boswell, of Elora, per Dr. Campbell Meyers.

For box of pencils: from Buntin, Reid & Co.

For \$30.00, for awning for tubercular patient: from Mr. P. C. Larkin.

For \$50.00, for apparatus for Pathological Laboratory: from Mr. P. C. Larkin.

For \$100.00, for maintenance: from Mr. Massey Morris.

For \$200.00, for salary of Dr. G. W. Ross: from Dr. J. F. W. Ross.

For \$200.00: from Mr. Michael McLaughlin.

By the wills of two friends of the Hospital: \$15,000, to be paid to the Hospital on the demise of the testators, to be applied to the care of Italian patients.

The following magazines have been supplied gratuitously to the Internes' and Students' Reading Room, for which acknowledgments have been made to the publishers:

American Journal of Surgery.
Annals of Gynaecology and Pediatrics.
American Practitioner and News.
Albany Medical Annals.
Alumnae Register, University of Pennsylvania.
British Medical Journal.
The Johns Hopkins Bulletin.
The Buffalo Medical Journal.
Canadian Practitioner and Review.
California Medical Journal.
Cleveland Medical Journal.
Deutsche Medizinische Wochenschrift.
Canadian Lancet.
Canadian Journal of Medicine and Surgery.
Dental Registrar.
Dental Review.
Dominion Medical Monthly.
Dietetic and Hygienic Gazette.
Dental Cosmos.
Detroit Medical Journal.
The Journal of the Michigan State Medical Society.
Interstate Medical Journal.
International Journal of Surgery.
The Lancet (British).
Louisville Medical Journal.
Merck's Annual.
Medical Bulletin.
Medical Council.
Medical Times.
Medical Review.
Montreal Medical Journal.
Monthly Cyclopedia.
Maritime Medical News.
The National Hospital Record.
New York Medical Journal.
New England Medical Monthly.
The Post-Graduate (New York).
Providence Medical Journal.

Pacific Medical Quarterly.

Revue de Médecine.

Southern Medical Journal.

Southern Practitioner.

Southern California Practitioner.

Southern Medical and Surgical Journal.

Scottish Medical and Surgical Journal.

Toronto Hospital for Insane (Journal of).

Virginian Medical Monthly.

The Western Medical Review.

The Wisconsin Medical Journal.

Hospital Inspector's Report.

Below is an extract respecting the Hospital from the last report of the Provincial Inspector of Hospitals:

Dietary.

“The dietary is very suitable, and it is carefully prepared and well served.

“The supplies are furnished by contract and by open purchase. There is now an excellent system of stock-keeping, by which every article purchased and used in the Hospital is traceable.

The Records.

“The records are neatly and correctly kept by the Secretary.

“A careful record is kept of the disposition of all supplies by a system of requisitions, which is excellent, and regular account of stock is taken.

“There is a regular stock book kept by an excellent card index system.

Special Features Observed at Inspection.

“While this Hospital has many structural defects, and in many parts the signs of age are very apparent, every effort is being made to conduct the institution in the best possible manner under the circumstances. The conditions in many parts of the Hospital have been greatly improved. The expenditure for plumbing last year were well made, and the results have fully justified the much-needed outlay. Several parts of the Hospital have been greatly improved by painting.

Needs and Recommendations.

“There are many improvements in the equipment of this Hospital since last inspection: (1) The Psycopathic Wards have been opened and commencement made for the first time in a Canadian hospital of treating border-line cases of threatened mental diseases. The success of this effort will, it is hoped, result in the establishment in Toronto of a distinct and separate Psycopathic Hospital and Clinic. (2) A new X-ray apparatus has been purchased and is now in use. (3) A supply room has been opened for the preparaton of surgical dressings. (4) The Clinical Laboratory has been greatly improved. (5) Many needed repairs, including new plumbing, have been attended to.

Remarks.

“Thirty-five hundred and eighty-three patients were admitted to this hospital during the past year. The system of registration of cases has been greatly improved by the introduction of the card index system and the accurate registration of clinical notes has thereby been greatly facilitated.

“The daily cost of maintenance at this Hospital for the past year was \$1.33 per patient, which, under the circumstances, and when compared with the cost of maintenance of American city hospitals, is most satisfactory. The system of accounting shows that all expenditures have been prudently guarded, and that by the card index system any indications of waste can be readily checked.”

Yours faithfully,

JOHN N. E. BROWN,
Superintendent.

Statistical Return, Toronto General Hospital, for the Year Ending on September 30th, 1907.

Remaining in the institution on October 1st, 1906:	Males	Females	Total
Adults	163	101	264
Infants	7	8	15
Admitted during the year ending on Sept. 30, 1907.....	2,259	1,609	3,868
Births during the year ending on Sept. 30, 1907.....	111	91	202
	<u>2,540</u>	<u>1,809</u>	<u>4,349</u>

Discharged during the year ending on Sept. 30, 1907—	Males	Females	Total
Adults	2,042	1,470	3,512
Infants	98	82	180

Died during the year ending on Sept. 30, 1907—			
Adults	204	106	310
Infants (died or still-born)	15	10	25

Remaining in the institution on Sept. 30th, 1907—			
Adults	176	134	310
Infants	5	7	12
	<u>2,540</u>	<u>1,809</u>	<u>4,349</u>

Average stay of adult patients	26.3	days
Collective stay of adult patients	108,618	"
“ “ infants	3,496	"
“ “ adults and infants	112,114	"

Religions of patients treated—		
Protestant		3,774
Roman Catholic		402
Other religions (or not known)		173
		<u>4,349</u>

Nationalities of patients treated—		
Canada		2,304
England		1,080
Ireland		274
Scotland		231
United States		119
Other nationalities		341
		<u>4,349</u>

Residences of patients treated—		
City of Toronto		3,279
County of York		143
Other places in Ontario		907
Other countries		20
		<u>4,349</u>

Statement of New Hospital Special Building Account on September 30th, 1907.

Dr.

New Hospital site	\$373,584 50
Bank of Toronto, Building Fund Account.....	33,502 60
Call Loans	251,000 00
Building Fund Expenses	1,792 34
Accrued Interest	3,200 00

Cr.

Mortgage Payable	5,500 00
Ontario Government Grant	300,000 00
City of Toronto Grant	200,000 00
Subscriptions—General Fund	88,764 00
Mayor's Fund	2,348 66
Business Men's Fund	51,013 16
Interest on Loans and Bank Balance	15,453 62
	<hr/>
	\$663,079 44 \$663,079 44

(Signed)

A. F. MILLER,
Secretary Toronto General Hospital.

Audited and found correct,

(Signed)

H. W. EDDIS, F.C.A.,
D. G. CHESNUT,

Auditors.

Toronto General Hospital, Statement of Revenue Account for the year ending September 30th, 1907.

HOSPITAL RECEIPTS—		EXPENDITURE.	
		MAINTENANCE.	
Private and semi-private wards, paid by patients.....	\$50,177 92	Provisions	\$51,758 09
Public wards, paid by patients..	17,963 78	Ice.....	933 78
Public wards, paid by municipalities	18,948 20	Laundry, soap, etc.....	7,101 49
GOVERNMENT GRANT—		Coal.....	6,371 26
Grant from Government of Ontario for 1907	15,348 19	Gas, mantles and burners	3,191 13
Emergency Branch, for dressings.....	\$102,438 09	Electric light and power	1,617 24
Out-patient department for drugs and dressings.....	4 00	Water.....	5,448 29
Grease, waste, etc., sold	252 44	Drugs and medicines	7,804 26
Subscriptions and donations.....	296 71	Medical and Surgical appliances, bandages and dressings	468 48
Subscriptions, Opsonic	875 05	Laboratories	37,481 25
Subscription, "R. M. Boswell Fund" \$150 00	150 00	Salaries and wages	1,266 87
Less expended for same fund.....	150 00	Uniforms for Nurses and Surgeons, and medals.....	1,608 31
Honorary Visitors' Fund	2,900 00	Salaries of Pathologists, Opsonic Dept. and Medical Registrars	1,000 00
Students' admission fees and diplomas.....	2,964 00	Allowance Dr. O'Reilly	2,077 22
Students' Opsonic fees.....	125 00	Printing report	347 00
		Advertising	84 79
		Repairs, renewals and alterations	\$5,446 66
		Less special donation for alterations	537 04
ENDOWMENT—		Insurance chargeable to current year.....	4,909 62
Income from Geo. W. Lewis Bequest	\$ 475 00	Postage, etc.....	575 35
" " Amy Macdonald endowment.....	170 00	Street car tickets	324 78
" " Investments and Securities.....	634 61	Garden party, orchestra, cab fare, etc.....	48 00
Rentals, real property as follows:		Travelling expenses (Ludlow, N.Y.)	255 47
Ground rents.....	\$18,711 85	Telephone rent and switchboard operator, after deducting commission from slot phone	37 85
House rents.....	19,359 70	Solicitors' fees re potato peeler and opinion for Mr. Mullock	519 51
	\$38,071 55	Solicitors' fees re renewing debentures	42 62
Less charges as follows:		Brokers' commission re renewing debentures	163 45
Taxes.....	\$3,285 17	Furniture, linen, etc., expenditure for renewals and replacements	132 60
Water rates	315 15	Surgical instruments, renewals	8,333 50
Repairs and sanitation	1,535 45	Tuberculosis out-patient services (after deducting subscriptions.....)	140 00
Insurance	205 00	Interest on debentures	371 81
Solicitors' charges	65 67	" " loan	\$1,020 00
Rent of 105 Bay St.....	819 00	" " bank overdraft	134 55
	6,225 44	" " bank overdraft, accrued	70 00
	31,846 11		1,244 55
	33,115 72		
	\$143,131 01		
	3,110 16		
	\$146,231 17		
Deficit.....			\$146,231 17

Audited and found correct.
 (Signed) HY. WM. EDDIS, F.O.A.,
 D. GEO. CHESNUT,
Auditors.

(Signed) A. F. MILLER,
Secretary Toronto General Hospital.

Toronto General Hospital, Statement of Assets and Liabilities on Sept. 30th, 1907.

ASSETS.		LIABILITIES.	
ENDOWMENT—		Capital Account	
Mortgage (Lewis donation)	\$7,794 00	Reserve	\$801,772 56
Bond, New York & Chicago R. R. (Warren donation)	1,000 00	Add <i>re</i> Butland estate	\$224,889 63
Debentures, Gananoque (Amy Macdonald endowment and Henry bequest)	6,230 90	" " Reuben Stevens bequest	3,268 54
Debentures, Oshawa (Porter bequest)	925 50	" " John Foote bequest	500 00
Canada Permanent Mortgage Corp. (Funds to be re-invested)	1,086 76	Less deficit for year ending Sept. 30th	\$229,658 17
REAL ESTATE (producing revenue)—	17,037 16	226,548 01	\$1,028,320 57
Lands of the Hospital		Debentures	24,000 00
Buildings thereon owned by the Trust	\$614,289 59	Amy Macdonald endowment fund	4,000 00
Less depreciation fund	\$77,914 53	Geo. W. Lewis bequest	8,400 00
	67,914 53	Bank of Toronto, overdraft, current account	11,430 46
Real property, Butland estate	15,399 79	Bank of Toronto, accrued interest on overdraft	70 00
loan	3,443 41	Various accounts due, unpaid on Sept. 30th	12,074 05
Real property, G. W. Lewis bequest	18,843 20		
	8,400 00		
REAL ESTATE (in use by the Hospital)—	27,243 20		
Land of the Hospital block	80,625 00		
Hospital buildings	268,174 55		
Less depreciation fund	\$348,799 55		
	21,363 84		
FURNITURE AND EQUIPMENT—	327,435 71		
Furniture, bedding, linen, etc.	\$48,258 71		
Instruments and X-ray apparatus	8,725 00		
Laboratories	1,996 79		
Supplies and stores in stock	4,093 00		
Account books in stock	30 00		
Engine and boiler	550 00		
Less depreciation	\$63,653 50		
	36,054 64		
BOOK DEBTS—	27,598 86		
Ground rent due and accrued	\$2,919 28		
Municipal accounts outstanding	2,996 75		
Insurance premiums paid in advance for ensuing year	5,916 03		
	860 00		
	\$1,088,295 08		

Audited and found correct.
 (Signed) HY. WM. EDDIS, F.C.A.,
 D. GEO. CHESNUT,
 Auditors.

(Signed) A. F. MILLER,
 Secretary Toronto General Hospital.

The Twenty-Sixth Annual Report of the Toronto General Hospital Training School for Nurses.

To J. N. E. Brown, Superintendent:

DEAR SIR,—I beg to submit the Twenty-sixth Annual Report of the Toronto General Hospital Training School for Nurses for the year closing September 30th, 1907.

The number of applications received during the year has been 682; seventy-one of these entered the school on probation, fifty-one were accepted and enrolled as pupils, and one has been dropped from the roll. The present staff of the school, therefore, is as follows: Assistants, 2; night supervisor, 1; head nurses, 6; pupils, 86; and 16 probations. In addition to this staff, we have averaged nearly 9 nurses daily on special duty, or, in other words, the total number of days special nursing have been 3,236.

The work in the Hospital has been continuously arduous and exacting in all departments throughout the year. Typhoid fever, pneumonia, and meningitis have been unusually prevalent, while our operative cases have totalled 1,541.

The nurses who have received their nursing education in this school, up to the present time, now number 470. This includes the class of 29 who received the certificate and badge granted by this Training School on June 14th of the ensuing year. The graduating exercises in connection with this class were held on the 14th of June, 1907. The ceremonies, which included a fine address by Mr. Irving H. Cameron, the distribution of scholarships, prizes, badges, and certificates, took place in the amphitheatre of the Hospital, followed by a garden party on the lawn.

It must always be remembered that a School for Nurses, though primarily a place where we train or make nurses, is also—and this is the more important part of its work—a place where we seek to make women. In this community of over 100 young women, the process of transforming the untrained, undeveloped, undisciplined girl, into the thoughtful, self-restrained, capable, patient woman, goes on concurrently with that of the daily routine of hospital life. Day after day, and year after year pass, until, though necessarily with varying degrees of attainment, the long-desired goal is reached, and another class goes out from us to form a part of the great guild of trained women who have been sent out from this school, some to labor in the quiet of the sick room, some in hospitals in quiet towns or in large cities, and some in far-distant heathen lands.

In addition to the practical training given to our nurses in the wards of the hospital, there have been 148 demonstrations in the various details connected with nursing the sick, such as bed-making, the administration of baths, changing of sheets, etc.; 85

classes conducted by the Superintendent of the School, and her assistants, and 97 lectures delivered by various members of the visiting staff. The names of the lecturers and examiners in the final year are as follows:

General Medicine—A. McPhedran, M.B., Professor of Medicine and Clinical Medicine, University of Toronto; Dr. R. Rudolf, Associate Professor of Medicine and Clinical Medicine, University of Toronto.

Obstetres—Dr. K. Mellwraith, Associate Professor of Obstetrics, University of Toronto.

Diseases of the Nervous System—Dr. G. W. Howland, Tutor in Medicine, University of Toronto.

Insanity—Dr. C. Clarke, Asylum for the Insane, Toronto.

Dietetics—J. T. Fotheringham, B.B., M.D., Associate Professor of Medicine, University of Toronto.

The Eye and Ear—R. A. Reeve, B.A., M.D., LL.D., Professor of Ophthalmology and Otology; Dean of the Faculty, University of Toronto.

The Nose and Throat—Dr. G. Boyd, Associate in Laryngology and Rhinology, University of Toronto.

Diseases of the Skin—Dr. Graham Chambers, Associate Clinical Medicine, University of Toronto.

Surgery—Dr. G. A. Bingham, Associate Professor Clinical Surgery, University of Toronto.

Urinalysis—Dr. A. H. W. Caulfeild, Resident Pathologist, General Hospital.

The Literary Patient—J. N. E. Brown, Superintendent.

Examiners.

Adam H. Wright, B.A., M.B., Professor of Obstetrics.

R. B. Nevitt, B.A., M.D.

Allen Baines, M.D., C.M., Associate Professor of Pediatrics.

Physician to the School.

Dr. Goldwin Howland.

Lecturers.

Intermediate Year.

Surgery—C. B. Shuttleworth, M.D., C.M., F.R.C.S., Eng., Demonstrator of Clinical Surgery.

Surgery—Dr. E. Gallie.

General Medicine—Dr. Allan Canfield.

Gynæcology—F. Fenton, M.D., C. M. Associate in Obstetrics.

Tuberculosis and Bacteriology—H. C. Parsons, B.A., M.D., C.M., Demonstrator of Pathology

Hygiene and Sanitation—Dr. Chas. Hodgetts, Provincial Health Inspector.

*Lecturers.**Junior Year.*

Anatomy and Physiology—W. J. McCollum, M.B., Assistant Demonstrator of Anatomy, University of Toronto.

General Medicine—Dr. Cecil Burson.

Bacteriology—G. S. Ryerson, M.D., C.M., University of Toronto.

Materia Medica—Dr. H. S. Hutchison.

In addition to the final written and oral examinations in the Senior Year conducted by the before-mentioned examiners, there have been two examinations in the Intermediate Year, one in bandaging by Dr. E. Gallie, and one in hygiene, by Dr. C. A. Hodgetts, and also two in the Junior Year, one in anatomy by Dr. W. J. McCollum, and one in Practical Nursing by the Superintendent of the Training School.

The health of the School has been far from satisfactory; indeed, it has been the cause of much anxiety. There have been 11 cases of typhoid fever, 1 of scarlet fever, 1 of pleurisy, 1 of gastric ulcer, 1 mastoid case, and 5 cases of appendicitis (4 of which were operative), while many other nurses suffered from minor ailments. A total of 1,035 days were lost through illness, an average of almost 3 nurses daily throughout the entire year. We gratefully record the fact that all of these nurses have made a complete recovery.

In this connection we would gratefully acknowledge our indebtedness to Dr. Goldwin Howland, for his faithful and untiring services as physician to the school. We would also avail ourselves of this opportunity to place on record our appreciation and gratitude to many members of the Visiting Staff for the invaluable services they have rendered as consultants and surgeons.

There have been many calls for graduates to fill hospital positions during the year. The following have receive appointments:

Catherine Smith, Superintendent, General Hospital, Moosejaw, Assa.

Carrie Bowman, Superintendent, General Hospital, Portage la Prairie, Man.

Mary McIsaac, Superintendent, General Hospital, Edmonton, Alta.

Catherine Menzies, Superintendent, Northern Pacific Hospital, Tacoma, Wash.

Isabel Moodie, Superintendent, Good Samaritan Hospital, Dawson, Yukon.

Lottie Lawson, Lady Superintendent, Sanitarium, Gravenhurst, Muskoka.

Alice J. Scott, Lady Superintendent, General Hospital, Kingston, Ont.

Isabella Mary Brown, Lady Superintendent, General Hospital, Kenora, Ont.

Marie Snell, Assistant Superintendent, Jewish Hospital, Cincinnati, Ohio.

Lillian Sargent, Assistant Superintendent, General Hospital, Edmonton, Alta.

Kate Rose, Assistant Superintendent, General Memorial Hospital, Niagara Falls, N.Y.

Catherine Allison, Night Supervisor, Jewish Hospital, Cincinnati, Ohio.

Ida Burkholder, Head Nurse, Good Samaritan Hospital, Dawson, Yukon.

Hannah Lawson, Head Nurse, Good Samaritan Hospital, Dawson, Yukon.

Jeanette Neilson, District Nurse, Toronto.

Resignations: Toronto General Hospital, E. M. Lawler, assistant School for Nurses; C. Brown, B. Purdy, and M. Allen, head nurses; E. Jardine and L. Lindsay, district nurses.

Appointments for these vacancies: Jessie Scott, assistant School for Nurses; Agnes Baldwin, Kate Mitchell, Lily Lindsay, head nurses, and Margaret Cringle, housekeeper.

The Alumnae of this School have this year been called upon to mourn the death of three of their number, viz.: Mary Chalker Cranfield, Class 1884; E. L. Sewrey, Class 1896, and Matilda Craig, Class 1895.

In the death of the late Dr. George A. Peters, this School lost one of its oldest and truest friends. For more than twenty years, Dr. Peters gave his services freely and generously as lecturer, surgeon, counsellor and friend, not only to the Superintendent, but also to each and every nurse who needed him. Of him it may truly be said: "He rests from his labors and his works do follow him."

The Christmas Season was made happy for our nurses, not only on Christmas Eve, when our time-honored "tree" was again the feature of the evening, but also by a masquerade-party in the Residence, and, through the generosity of the visiting-staff and others, fifty volumes were added to our library.

Through the kindness of the members of the Board, the School has been privileged to enjoy a large number of periodicals, and, through the thoughtfulness of the editor, Dr. A. H. Wright, *The Canadian Practitioner*.

Mention may be made in this connection of the thoughtfulness of The Needlework Guild of Canada, who donated the following for patients leaving our Hospital, who may be in need of warm underwear: Men's shirts, 6; men's vests, 5; men's drawers, 1 pair; men's handkerchiefs, 3; men's socks, 22 pair; women's vests, 8; women's slippers, 1; children's vests, 9; infants' baracots, 2; infants' shirts, 2; infants' jackets, 2; infants' napkins, 18.

Through the generosity of Mrs. R. B. Hamilton, and others, a fund of \$140 has been raised to provide student chairs for our class-room.

In addition to the Scholarships provided last year, one of \$50, by Mr. J. D. Patterson, of Woodstock, and one of \$25, by the Alumnae Association, three additional scholarships have been donated this year: "The Arthur McCollum Memorial Scholarship," of \$50, for General Proficiency in the Junior Year, by Mrs. Charles E. Kyle; the "Mrs. W. T. White Scholarship," of \$50, for General Proficiency in the Intermediate Year, by W. T. White, Esq., one of our Trustees(and the "C.C." Scholarship of \$50, for General Proficiency in the final year, by Charles Cockshut, Esq., also a member of our Board of Trustees.

In closing this report, the authorities desire to record once more their deep sense of obligation to all who, by word or deed, have contributed to the encouragement, comfort, happiness, or efficiency of the Training School.

MARY AGNES SNIVELY,
Superintendent of the Training School.

Graduating Class, 1907.

Millie C. Allen	.....Alliston, Ont.
Evelyn Lucretia Beatty	.....Toronto, Ont.
Berta Brydon	.....Little Current, Ont.
M. A. Beatrice L. Ellis	.....Doaktown, N.B.
Effie M. Feeny	.....Toronto, Ont.
Katherine M. Forrest	.....Toronto, Ont.
Grace A. Gray	.....Eden, Ont.
Rose Hally	.....Toronto, Ont.
Ada W. Hammell	.....Beeton, Ont.
Lella D. Harper	.....Uxbridge, Ont.
Blanche L. Harrington	.....Wellington, Ont.
Mary Jackson	.....Woodstock, Ont.
Alice M. Johnston	.....Dartsmouth, N.S.
A. Thyra B. Jordon	.....Perth, Ont.
Alice B. McLeod	.....Toronto, Ont.
Margaret McKay	.....Aberfoyle, Ont.
Mary A. McLeod	.....Manitowaning, Ont.
Kate Mitchell	.....Toronto, Ont.
Louisa Morrison	.....Ashgrove, Ont.
E. A. Offord	.....Galt, Ont.
Margaret J. Riddle	.....Kirkwall, Ont.
Kate G. Rose	.....Elora, Ont.
Minnie H. Samson	.....Chatham, Ont.
Annie T. Scadding	.....Toronto, Ont.
Jessie T. Scott	.....Barbadoes, B.W.I.
Adelyne M. Skinner	.....Schomberg, Ont.

Emmaline E. SmillieSalem, Ont.
Jennie E. SmithAurora, Ont.
Clara L. WhiteToronto, Ont.

Scholarships and prizes were awarded to the following students in Senior Year:

A Scholarship of \$50.00, offered by Mr. J. D. Patterson, of Woodstock, For Excellence in Application of Principles of Aseptic Surgery—Millie C. Allen, Alliston, Ont.

Scholarship of \$25.00, offered by Training School Alumnae for best Essay on "Care of Typhoid Fever Patient"—M. A. B. Ellis.

First Prize, General Proficiency, offered by Dr. Charles O'Reilly—Evelyn L. Beatty, Toronto, Ont.

Second Prize, General Proficiency, offered by Mrs. Walter S. Lee—Millie C. Allen, Alliston, Ont.

Third Prize, General Proficiency, offered by R. L. Patterson, Todmorden—Effie M. Feeny, Toronto, Ont.

Special Prize, Practical Nursing, offered by Dr. J. N. E. Brown—Minnie, H. Samson, Chatham, Ont.; Emmaline E. Smillie, Salem, Ont.

Special Prize for neatness and order in bedroom, offered by Mrs. R. B. Hamilton—Beatrice Ellis, Doaktown, N.B.; E. A. Offord, Galt, Ont.

Report of the Pathological Department.

Dr. J. N. E. Brown, Superintendent Toronto General Hospital:

SIR,—I beg to make a report on the Pathological Department as follows: For the past year, ending October 1st, 1907, all laboratory work, clinical and pathological, has been done by the resident pathological staff. The work in post-mortem pathology has been especially interesting, both clinically and pathologically. Among some of the more interesting cases might be mentioned: (1) Primary carcinoma of the liver, (2) Generalized blastomycosis, (3) General glandular tuberculosis without involvement of lungs, (4) Three cases of follicular enteritis, all of which showed a bacillus pyocaneus infection, (5) Diverticulitis of rectum.

From October 1st, 1906, to October 1st, 1907, there were one hundred and seventeen autopsies performed. Sections of various organs were preserved and sections made in more interesting cases.

The following is a brief analysis of the pathological conditions obtained:

CASE 1.—Male, aged 58. Papilloma of bladder, fatty degeneration of heart, œdema of lungs, slight chronic interstitial nephritis.

CASE 2.—Male, aged 45. Phlegmonous inflammation (extensive) of the left scapular region, general pyæmia pneumonia and pleuritis, abscess of heart, miliary abscesses of kidney, infection—staphylococcus pyogenes aureus.

CASE 3.—Male, aged 50. Purulent lepto-meningitis, chiefly of the base of the brain and spinal meninges; general arterio-sclerosis; chronic interstitial nephritis; chronic pleuritis; chronic lobular pneumonia; hydrocele; infection—pneumococcus and staphylococcus pyogenes aureus.

CASE 4.—Male, 80. Fracture, third to ninth rib on left side, third to sixth rib on right side, and twelfth dorsal vertebra; emphysema, with œdema of lungs, brown atrophy of heart; general arterio-sclerosis; chronic interstitial nephritis.

CASE 5.—Male, aged 29. Acute pleuritis left side; pulmonary collapse left lung; cirrhosis of liver; calculi in the pancreatic duct.

CASE 6.—Female. Mitral stenosis; valvular endocarditis of mitral and tricuspid valves.

CASE 7.—Male, aged 40. Generalized blastomycosis; general pyæmia; abscesses of spleen and kidneys; mastoiditis; meningitis.

CASE 8.—Male, aged 52. Subacute fibrinous and ulcerative colitis; punctiform ulceration of gastric mucosa; œdema of lungs; pulmonary emphysema; infection—bacillus pyocaneus.

CASE 9.—Male, aged 33. Aneurysm of arch of aorta; syphilitic aortitis; general atheromatous change in aorta; moderate chronic tuberculosis of lungs; slight chronic interstitial nephritis.

CASE 10.—Female, aged 25. Partial autopsy; multiple abscesses of kidney; ulceration and gangrene of lower portion of uterus and cervix.

CASE 11.—Male, aged 70. Carcinoma of cardiac orifice of stomach, with constriction; gangrene of lungs; broncho-pneumonia; subacute and chronic interstitial nephritis; old fibrous adhesions of the pericardium.

CASE 12.—Male, aged 47. Carcinoma of pyloric end of stomach; secondary carcinoma of liver; subphrenic abscess and secondary abscesses of liver; empysema of lungs; brown atrophy of heart; infection—*bacillus coli*.

CASE 13.—Female, aged 75. Lobar pneumonia, left side; general senile atrophy of the organs.

CASE 14.—Male, aged 26. Mastoid operation; chronic valvular endocarditis; tricuspid, aortic, and mitral stenosis; slight sclerosis of aorta; chronic endarteritis; brown induration of lungs; congestion of kidneys and all abdominal organs.

CASE 15.—Male, aged 40. Right lobar pneumonia; cedema of left lung; infection—*staphylococcus pyogenes aureus*.

CASE 16.—Male, aged 65. Primary carcinoma of liver; metastatic carcinoma of lungs; lobar pneumonia; moderate chronic interstitial nephritis.

CASE 17.—Female, aged 46. Partial autopsy operation; vaginal hysterectomy; general peritonitis.

CASE 18.—Female, birth. Pulmonary atelectasis.

CASE 19.—Female, birth. Spinal meningocele; pulmonary atelectasis.

CASE 20.—Female, aged 60. Partial autopsy, general peritonitis.

CASE 21.—Male, aged 16. Aplasia of right kidney; atrophy of left kidney; hydronephrosis; dilatation (extreme) of both ureters; tuberculosis of lungs; tubercular peritonitis.

CASE 22.—Male, aged 5 days. Inanition; patent foramen ovale.

CASE 23.—Male, still-born. Pulmonary atelectasis.

CASE 24.—Male, aged 55. Lobar pneumonia; chronic diffuse nephritis.

CASE 25.—Female, aged 54. Tuberculosis of lungs; tuberculous broncho-pneumonia; chronic interstitial nephritis; abscess of brain; infection of abscess—*streptococcus*.

CASE 26.—Male, aged 18. General peritonitis; gangrenous and perforative appendicitis; post-typhoid; pigmentation and pinhead ulceration of Peyer's patches.

CASE 27.—Male, aged 45. Perinephric abscess right side; cystitis, pyelitis, and pyelonephritis; amyloid spleen; fibrous pleuritis; infection—*staphylococcus pyogenes aureus*.

CASE 28.—Male, aged 22. Pulmonary tuberculosis; recent tuberculous broncho-pneumonia; peribronchitis; old fibrous pleurisy; hemorrhagic erosions of gastric mucosa; hyperæmia of kidneys.

CASE 29.—Female, aged 18. Typhoid fever, marked ulceration of bowels; appendicitis; acute tubular and glomular nephritis; broncho-pneumonia.

CASE 30.—Male. Dilation of right heart; mitral and tricuspid incompetence; passive congestion of lungs and bronchial mucosa; pleural effusion; old fibrous pleuritis; hyperæmia of kidneys; fatty infiltration of liver.

CASE 31.—Female, aged 17.—Carbolic acid poisoning; acute inflammation of stomach; passive congestion of lungs; hyperæmia of kidneys.

CASE 32.—Female, aged 46. Lobar pneumonia, syphilitic aortitis; moderate interstitial nephritis.

CASE 33.—Male, aged 14. Operation for appendicitis; acute dilatation of stomach; perforation of stomach; definite necrotic areas, with leucocytic infiltration in stomach wall.

CASE 34.—Male, aged 61. Uræmia; œdema of lungs; localized lobular pneumonia of right upper lobe; hypertrophy and dilatation of heart; some sclerosis of visceral arteries; follicular enteritis; chronic interstitial nephritis; œdema of brain; internal hydrocephalus; infection-bacillus pyocyaneus in brain and spleen.

CASE 35.—Female, aged 70. Acute bronchitis and bronchiolitis; bronchiectatic dilatation of tubes; empysema of lungs, with areas of chronic pneumonia; hypertrophy of right heart, with fatty degeneration; chronic interstitial nephritis; nutmeg liver; general anasarca; kyphosis.

CASE 36.—Male, aged 54. Fibrino-purulent pleurisy of right side, lobar pneumonia right lung; acute bronchitis left side; chronic gastritis; infection in lung, pneumococcus.

CASE 37.—Male, aged 60. Operation for prostatectomy; mitral incompetence; slight fatty infiltration of liver.

CASE 38.—Female, aged 25. Carcinoma of stomach, with cardiac and pyloric stenosis; general chronic peritonitis; fatty degeneration of liver and kidneys.

CASE 39.—Male, aged 42. Fracture of base of skull; œdema of brain; internal hydrocephalus; thrombosis of vessels at base of brain; hypostatic pneumonia; chronic tuberculosis of lungs; fatty degeneration of heart, liver, and kidneys.

CASE 40.—Female, aged 40. Hypertrophic cirrhosis of liver; chronic diffuse nephritis.

CASE 41.—Female, aged 19. Pneumonia of left lung; pulmonary embolus; cyanosis of liver and spleen.

CASE 42.—Male, aged 53. Compression myelitis; sarcomatous caries of fourth and fifth dorsal vertebra, sarcomatous caries of fifth and sixth ribs on right side and fourth rib on left side; lobar pneumonia, beginning chronic interstitial nephritis.

CASE 43.—Male, aged 62. Membranous colitis; hypostatic pneumonia and œdema of lungs; fatty degeneration of heart; moderate interstitial nephritis.

CASE 44.—Female, aged 7 days; icterus neonatorum; cerebral hemorrhage; intra-ventricular cerebral hæmorrhage; patent ductus arteriosus and foramen ovale.

CASE 45.—Infant, female, still-born. Pulmonary atelectasis; patent foramen ovale.

CASE 46.—Male. Acute endocarditis; mitral valvular aneurysm; hypertrophy and dilatation of heart.

CASE 47.—Female, aged 63. Cerebral thrombosis, hæmorrhagic softening of left cerebral hemisphere; purulent bronchiolitis and broncho-pneumonia; purulent pleuritis, beginning pericarditis; general arterio-sclerosis; carcinoma of uterus.

CASE 48.—Female, aged 5 days. Idiopathic hæmorrhage of new-born.

CASE 49.—Male, aged 65. Empyema; lobar pneumonia; abscesses of lung; emphysema; acute toxic nephritis.

CASE 50.—Female, aged 24. Tuberculous meningitis; general miliary tuberculosis.

CASE 51.—Female, aged 47. Carcinoma of right mammary glands; secondary carcinoma of the liver; general carcinoma of glands; lobar pneumonia; pleuritis, with effusion; old fibrous pleuritis; patent foramen ovale; old periostitis.

CASE 52.—Male, aged 70. Diabetic ulcers; post scapular abscess; multiple abscesses of left leg, with cellulitis; œdema of lungs; interstitial nephritis.

CASE 53.—Male, aged 35. Operation for gastro-jejunostomy; old ulcer of duodenum; gastric hæmorrhage.

CASE 54.—Female, infant, 5 days. Idiopathic hæmorrhage of new-born.

CASE 55.—Female, aged 16. Tuberculous broncho-pneumonia; general miliary tuberculosis, lungs, liver, and spleen; pericarditis with effusion.

CASE 56.—Male, aged 35. Typhoid fever; typhoid ulceration of ileum; peritonitis; septic broncho-pneumonia; laparotomy operation wound.

CASE 57.—Male, aged 42. Cerebral hæmorrhage; fatty infiltration of liver, subacute diffuse nephritis.

CASE 58.—Male, infant, still-born. Pulmonary atelectasis; pericardial effusion; patent foramen ovale.

CASE 59.—Female, aged 25. General miliary tuberculosis; tuberculous meningitis; subacute diffuse nephritis.

CASE 60.—Male, aged 20. Pulmonary tuberculosis; tubercular broncho-pneumonia; pericardial effusion; chronic interstitial nephritis.

CASE 61.—Male, aged 16. Tuberculous meningitis; cerebral congestion; chronic interstitial nephritis.

CASE 62.—Male, aged 38. Lepto-meningitis, mastoiditis, œdema of lungs; infection staphylococcus pyogenes aureus in brain and left mastoid.

CASE 63.—Male, aged 70. Mitral incompetence, hypertrophy and dilatation of heart; fatty degeneration of heart and liver; pleural effusion, œdema of lungs; subacute diffuse nephritis; supernumerary spleen; patent foramen ovale.

CASE 64.—Female, aged 54. Diverticulæ of rectum; sigmoiditis; proctitis; recto-vesical fistula; ulceration of sigmoid and rectum; fibroid of uterus; peritonitis; interstitial nephritis.

CASE 65.—Male, aged 16. Tricuspid endocarditis; metastatic pneumonia; toxic hepatitis; chronic parenchymatous nephritis.

CASE 66.—Male, aged 73. Old myocarditis, hypertrophy and dilatation of heart; fatty degeneration of heart; atheromatous ulceration of aorta; general arterio-sclerosis; œdema of lungs; pleurisy with effusion; old fibrous pleurisy; interstitial nephritis.

CASE 67.—Male, aged 35. Right lobar pneumonia; old and recent fibrinous pleurisy; fatty infiltration of liver; toxic nephritis.

CASE 68.—Male, aged 39. Tuberculosis of kidney and bladder; tubercular peritonitis; broncho-pneumonia.

CASE 69.—Male, infant, still-born. Pulmonary atelectasis; cerebral congestion.

CASE 70.—Female, aged 59. Lobar pneumonia; œdema of lungs, cholelithiasis; extensive excoriation of skin; chronic interstitial nephritis.

CASE 71.—Male, aged 62. General glandular tuberculosis; tuberculous peritonitis; pleurisy with effusion; pericardial effusion.

CASE 72.—Male, infant, 7 days.

CASE 73.—Male, aged 53. Fracture of base of skull; laceration of brain substance; cerebral hæmorrhage; contusion and laceration of scalp, with hæmorrhage.

CASE 74.—Male, aged 56. Transverse myelitis; decubitus ulcers; moderate tuberculosis of lungs.

CASE 75.—Female, aged 35. Septicæmia, œdema of lungs.

CASE 76.—Male, aged 50. Partial autopsy; carcinoma of stomach; metastatic carcinoma of omentum and mesenteric glands; ascites.

CASE 77.—Male, aged 60. General peritonitis; follicular enteritis; mitral incompetence; aortic stenosis; fatty degeneration of heart and liver; œdema of lungs; pleural effusion; hypertrophy; left ventricle; interstitial nephritis.

CASE 78.—Male, aged 20. Amputation of left leg; old fibrous pleurisy; old patchy meningitis.

CASE 79.—Male, infant, still-born. Pulmonary atelectasis; patent foramen ovale.

CASE 80.—Male, aged 54. Partial autopsy. Scirrhus carcinoma of stomach.

CASE 81.—Female, aged 53. Hæmorrhage of bladder; chronic nephritis.

CASE 82.—Male, aged 22. Pulmonary tuberculosis; interstitial nephritis.

CASE 83.—Male (colored), aged 35. Cystitis; acute diffuse nephritis; fatty degeneration of liver; perisplenitis; aortitis.

CASE 84.—Male. Septicæmia; ulceration of right leg and groin; ulceration of right hand.

CASE 85.—Male, aged 50. Diabetes mellitus; epithelioma of glands of groin, with deep ulceration; amputation of penis; acute parenchymatous nephritis.

CASE 86.—Female, aged 48. Broncho-pneumonia; œdema of lungs; old fibrous tuberculosis; old fibrous pleurisy; interstitial nephritis.

CASE 87.—Male, aged 26. Fracture fifth and sixth cervical vertebra; fracture dislocation of fifth and sixth cervical vertebra; rupture of ligaments; laceration of spinal cord from fourth to seventh cervical vertebra; œdema of lungs; tuberculosis of lungs, liver, spleen, and intestines; old fibrous pleurisy; diffuse nephritis.

CASE 88.—Female, infant (premature birth), aged 5 days. In-anition.

CASE 89.—Male, aged 60. Anthracosis of lungs; extensive chronic pneumonia of right lung; œdema of lungs; hypertrophy of heart; general passive congestion of abdominal organs.

CASE 90.—Infant, birth (still-born). Pulmonary atelectasis.

CASE 101.—Female, aged 71. Broncho-pneumonia; purulent bronchitis and bronchiolitis; patent foramen ovale; fibrous perisplenitis; general enteroptosis; chronic interstitial nephritis; coronary sclerosis; arterio-sclerosis of the mesarteritis type.

CASE 102.—Female. Tumour of brain, sarcomatous in character.

CASE 103.—Male, aged 25. Broncho pneumonia; capillary bronchitis; ulceration of small intestine, chiefly ileum; tumification, congestion, and necrosis of glands; toxic nephritis; old, adhesive pleuritis; perihepatitis; positive widal obtained.

CASE 104.—Male, aged 62. Carcinoma of liver; carcinoma of gastro-hepatic glands; tuberculosis of spine; apical tuberculosis of lungs; interstitial nephritis.

CASE 105.—Male, aged 28. Typhoid fever, rupture of spleen, liver, and kidney; toxic nephritis; suicide.

CASE 106.—Female, aged 21. Typhoid fever, cholecystitis; pyelonephritis.

CASE 107.—Male, aged 33. Peritostitis, necrosis of jaw; phlegmonous inflammation of jaw with extension into the tongue; chronic interstitial nephritis.

CASE 108.—Male, aged 60. Colostomy; carcinoma of sigmoid flexure; slight ulceration of descending colon; interstitial nephritis; healed pulmonary tuberculosis; pulmonary emphysema and œdema of lungs.

CASE 109.—Male, infant (still-born). Pulmonary atelectasis.

CASE 110.—Infant (still-born). Pulmonary atelectasis.

CASE 111.—Male, aged 32. Peritonitis, lower half of abdomen; old peritonitis in upper half.

CASE 112.—Female, aged 65. Partial autopsy only; laparotomy; early general peritonitis, with adhesions of loops of intestines, especially towards pelvis; perforation of lower portions of ileum at three points; suture of former perforation.

CASE 113.—Male, aged 78. Broncho-pneumonia; œdema of right lung; pleuritis; general arterio-sclerosis; slight chronic interstitial nephritis; glycosuria of senility.

CASE 114.—Male, aged 25. Extra dural hæmorrhage and clot; fracture of base of skull in anterior fossa; slight interstitial nephritis.

CASE 115.—Female, aged 26. Myocarditis; chronic diffuse nephritis.

CASE 116.—Male, aged 18. Laparotomy and perforation of bowel; typhoid fever; gangrenous area surrounding perforation in ileum; ulceration of intestine.

CASE 117.—Male, aged 60. Acute parenchymatous and chronic nephritis; pulmonary œdema and healed tuberculosis of lungs; hypertrophy of heart; perisplenitis; sub-peritoneal abscesses of small intestine; sclerosis of circle of Willis.

CASE 118.—Male. Myocarditis, hypertrophy, and dilation of heart; coronary sclerosis; diaphragmatic empyæma; miliary tuberculosis of right lung; tuberculous ulceration of small intestine; tuberculosis of spleen; chronic diffuse nephritis.

CASE 119.—Male, aged 65. Pneumoconiosis; hypertrophy of heart; general arterio-sclerosis; absolute tuberculosis of lung; empyæma of gall bladder; interstitial nephritis.

CASE 120.—Male, aged 42. Acute purulent bronchitis; œdema of lungs; hypertrophy of heart.

CASE 121.—Male (colored), aged 68. Pulmonary thrombosis; pulmonary emphysema and œdema; hypertrophy of heart; dilatation of right auricle; congenital presence of four cusps on pulmonary valve; brown atrophy of heart muscle; arterio-sclerotic kidney.

CASE 122.—Male, aged 21. Lobar pneumonia of right upper lobe; hypostatic pneumonia of both lower lobes; purulent leptomeningitis; endocarditis of valves, with two perforations of aortic valves; chronic interstitial nephritis.

CASE 123.—Male, aged 60. Broncho-pneumonia, capillary bronchitis; brown atrophy of heart; gastroptosis and enteroposis.

CASE 124.—Infant, 18 days.

CASE 125.—Female infant (still-born).

CASE 126.—Male, aged 50. Broncho pneumonia, with emphysema; hypertrophy of heart, especially left ventricle; patent

foramen ovale; slight coronary sclerosis; early hepatic cirrhosis; acute parenchymatous nephritis.

CASE 128.—Male aged 58. Osteophitic outgrowth of femur, non-malignant; ununited fracture of head of femur; extensive phlegmonous abscess at upper part of right thigh; hypostatic broncho pneumonia; moderate chronic diffuse nephritis; extensive mesarteritis of arteries of extremities.

Report on Surgical Pathology.

From October 1st, 1906, to October 1st, 1907, 232 specimens were examined. During the past year all surgical pathological specimens have been forwarded to the laboratory, and examinations made on all specimens when they were asked for by the surgeon, and on other specimens where the department thought necessary. Gross pathological reports have been made on most of the appendices forwarded to the laboratory. The examinations are classified as follows:

Carcinoma of breast	17	Epithelioma of lip	6
“ inferior maxilla..	3	“ leg	1
“ uterus	5	“ nares	1
“ tongue	3	“ face	2
“ superior maxilla..	4	“ bladder	1
“ cervix	4	“ sup. max. glands.	1
“ descending colon.	1	“ parotid ...	1
“ ovary	3	Fibromyoma uterus	5
“ groin	1	Papilloma of penis	3
“ liver	1	“ bladder	1
“ stomach	2	Adenoma of prostate	1
“ neck	3	“ breast	4
“ nose	1	Fibroma of breast	2
Sarcoma of glands of groin....	1	Actinomyces of neck	1
“ uterus and tubes ..	1	Lipoma in axilla	1
“ brain	1	Rodent ulcer	2
“ ear	1	Mixed tuberculosis and carcino-	
“ eye	1	ma of sigmoid flexure	1
“ cheek	1	Tuberculosis of glands of neck..	11
“ thigh	1	“ bladder	1
“ superior maxilla ...	3	“ abscess walls ...	2
“ biceps	1	“ bone	3
“ sternum	1	“ testicle	3
“ omentum	1	“ leg at thigh	1
“ ankle	1	“ tube	1
“ tonsil	1	“ sinus	1
“ pelvis	1	Unclassified, inflammatory con-	
Lipo-sarcoma of buttock	1	ditions, etc.	110

D. A. L. GRAHAM,

Acting Resident Pathologist.

ANNUAL REPORT OF THE NERVOUS WARDS

J. N. E. Brown, Esq., M.B., Superintendent Toronto General Hospital:

Sir,—In presenting the first annual Report of the Nervous Wards, I have much pleasure in stating that the successful results thus far obtained have been in excess of what was predicted when these wards were established. These results have demonstrated clearly that the development of the acute insanities may be prevented in a very large proportion of cases, when treatment is commenced sufficiently early.

In the first report of these wards, which was issued on June 30th, '06, a short sketch of the origin of these wards and the object for which they were formed was given, but owing to the special nature of the work, and to its being the first of the kind in Canada, this object has, at times, not been clearly understood. I would like, therefore, to state that these wards were advocated and established for the treatment of and instruction in all Functional Neuroses, and especially those forms of neurasthenia in which the symptoms indicated that insanity might develop in the onward progress of the disease. These wards were *not* established for the treatment of the insane, and doubtful cases of insanity are only received for observation, after which, if the boundary line of insanity has been passed, they are transferred to an asylum for treatment. When the nervous wards were established it was hoped that a separate department for the treatment of the insane under the charge of an alienist might also be formed, but this could not at that time be accomplished. As it has been clearly demonstrated by actual experience that it is impossible to treat cases of acute insanity in the same wards as those of functional nervous disease, no prolonged assistance could be offered to insane patients in these wards. Moreover, the fact that patients, who were simply nervous, were to be treated in the same wards as those suffering from insanity, would have caused nervous patients to defer entering these wards as long as possible, with the result that the most favorable period in the treatment of their disease would have passed, and the prevention of insanity become impossible. On two or three occasions since these wards have been in operation the presence of a patient, even for a few hours, who was *visibly* insane, has so excited the remainder of the patients that they did not regain their composure until days after this patient had been removed from the building, and, in consequence, their improvement was naturally much delayed, or even greater harm produced. Hence, to receive doubtful cases of insanity, in which the general behaviour of the patient is not visibly

affected for a sufficient length of time to confirm the diagnosis, is the utmost assistance these wards can offer to the insane. The importance, therefore, of advising treatment in these wards, at as early a stage of the disease as possible, and before the development of any delusions, cannot be over-estimated. Once insanity has developed, its prevention (*ipso facto*) remains no longer possible, but often weeks, or more often months, elapse between the time when a patient begins to suffer from a nervous breakdown until the boundary line of insanity is reached, a period when treatment in these wards offers the best prospects of restoration to health.

In regard to the arrangement of the wards, I may say that they contain twelve (12) beds, eight of which are in two wards, while the remaining four are each in a separate or isolation ward. As a rule the treatment can be best carried out by complete isolation in separate rooms during its early stages, and that later, when the patients are well started on the road to recovery, a small number may be placed in an open ward together. As there are only two separate wards on each floor at present in which patients can be isolated, the need of further wards of this nature has been much felt in treatment, since it has frequently rendered it necessary to place a patient who was sleepless or restless on admission in the same ward as three others, who, at the same time, were considerably advanced towards recovery, with the result that their progress was much delayed. Some additional isolation wards would, therefore, be of the greatest assistance. Moreover, the need of further accommodation is shown by the waiting list, especially in beds for women, as from three to six female patients are constantly awaiting admission. As considerable delay is often necessary at present for such patients to obtain admission, their disease at times becomes so far advanced that the period in which the best results are to be obtained from treatment has passed. An instance of this kind recently occurred. Application for admission was made for a female patient, who was examined at the time, and the case found entirely suitable. There was no vacancy for three weeks, and the patient's friends were then notified, and she was brought to the hospital. Here it was found that her condition had become so aggravated while awaiting admission that she could no longer control her actions, and she had to be sent away.

Before discussing the results of treatment in these wards, I would like to explain that certain patients were admitted for observation only. The formation of this class was rendered necessary by the fact that a large proportion of the cases recommended for treatment simply as nervous were found on examination to present evidences of insanity. These cases were submitted to observation for a sufficient length of time to determine the diagnosis, and when it was satisfactorily determined that the patient was insane his friends were notified of this result, and he was transferred to an asylum, or taken home. Further, a few of the cases

admitted as functional were found, after observation, to be suffering from organic nervous disease, and a few others refused to remain and obey directions after the first few days. Hence, these cases for observation and diagnosis are not considered as forming any part in the results of treatment in these wards.

The total number of patients admitted to these wards since their inception in May, 1906, to September 30th, 1907, was 100. Of this number 24 were admitted for observation and 76 for treatment.

Of the 24 observation cases 16 were found to be insane and transferred to an asylum, or taken home; 3 refused to obey directions and were discharged in a few days after admission; 2 were cases of brain tumor, 1 of cerebral syphilis, and 2 still remain under observation. Of these 16 cases of insanity, which had been recommended for treatment as cases of nervous exhaustion, the majority belonged to the class of chronic insanities, as they were suffering from *Dementia Praecox*, or *Paranoia*. In one case of *Paranoia* the value of these wards from the point of view of observation alone was well shown. The patient (W. E.) was admitted for the relief of some apparently ordinary nervous symptoms, when a detailed study of his condition demonstrated that he was actually insane, and there was grave danger that he would have committed murder had he not come under observation. As this man presented no visible signs of insanity to the ordinary observer, the fact that he was insane might have been learned only by a medico-legal inquiry after the crime had been committed. He was transferred to an asylum, where the onward progress of his disease has resulted in the complete destruction of his mental faculties. Other cases exhibiting a tendency to homicide, or involving the destruction of the happiness of a home, might be quoted, which were referred to these wards simply as "nervous," a study of whose symptoms, however, determined the diagnosis of insanity and led to their removal to an asylum.

Of the 76 cases of Functional Neuroses under definite treatment, 64 suffered from *Neurasthenia*, 2 from *Hysteria*, 2 from *Catalepsy*, 1 from *Epilepsy*, and 7 patients still remain under treatment (Sept. 30th).

General results of treatment:

Of the 69 cases whose treatment had terminated, 26 recovered, 35 improved, and 8 were unimproved by treatment. As was to be expected, many of these were chronic cases, some of them having been suffering for years. The average duration of treatment was between two and three months. In regard to the results of treatment after the patient left the hospital, these were observed as carefully as possible, although, of course, in a considerable number it was impossible to obtain positive information. As there is always a liability to relapse in any functional disease, if the patient subjects himself to the same injurious influences which originally induced it, it was naturally thought that in this, as well

as in any other branch of medicine, there would be a large number of such cases. Reports thus far received, however, indicate that only three relapses have taken place among the 26 classed as recovered. On the other hand, the after-reports of those classed as only improved in this report, show that 9 of this number reported later as quite well, and hence this number might very fairly have been added to the recovered, with a correspondingly improved result. Of the 8 patients unimproved by treatment, 3 died after leaving the hospital; 4 recovered, and 1 became permanently insane.

Special results of treatment in regard to the prevention of insanity.

A further analysis of the 69 cases above mentioned demonstrates that 50 of these were suffering from Psychasthenia, or that form of Neurasthenia having pronounced psychical symptoms, *an intensification of which would have resulted* in an attack of insanity. The results of treatment in these 50 cases are as follows: Recovered, 19; improved, 24; unimproved, 7; being 38 per cent. recovered, 48 per cent. improved, and 14 per cent. unimproved. Hence, of these 50 cases which were threatened with an attack of insanity, 43, or 86 per cent., recovered or were improved by treatment. The large proportion of Psychasthenia in above is due to the fact that those physicians who recommended these cases did so with a knowledge of the special object of the work, and sent only cases which might demonstrate it. It is manifestly impossible to state positively that all the cases of this form of Neurasthenia would have certainly become insane without treatment. If, however, a study of the symptoms of these cases were made, first, of those who became insane, and, second, of those who recovered the only difference to be discovered in these symptoms would be one of *intensity*. All suffered from pronounced psychical symptoms but with differences in the degree of their intensity, and it was this difference in the intensity of the symptoms of this same disease which resulted in insanity or recovery, just as in any other definite disease it would have resulted in recovery or death. None of these patients were insane when they were admitted, but in a certain number the onward course of the disease was marked by an intensification of the symptoms, which treatment could not prevent, and the boundary line of insanity was passed. The history of the following case (A. F.) is interesting, since she was admitted a *second* time for treatment before the close of this report. On her first admission her condition was such, owing to its long standing, that insanity could not be averted, and she was transferred to an asylum, where she recovered. The following year the shock of the sudden death of her sister induced another attack, and she *at once* applied for treatment. Although she was obliged to wait about four weeks for a vacancy, the result of this early treatment was entirely satisfactory, and she was sent home well.

The history is as follows:

A. F.—Female. Age 33. Married. Admitted June 3rd, 1906. Discharged Aug. 8th, 1906.

Complaint.—Nervousness; weakness.

Family History.—F. d., age 57; asthma. M. 1.; has had nervous trouble. S. 2, 1. and w. B. 3, 1. and w.; 1 died in infancy.

Personal History.—Born in Canada 33 years ago. Lived at home before marriage. Has been married four years. One child alive and well, 3 years old. As a child patient was very delicate and nervous. About 10 years ago she had a nervous attack, with indigestion. Home life has always been happy. Menorrhagia has been constant.

Past Illnesses.—Measles and pertussis when a child. Appendicitis 4 years ago—(no operation)—was laid up several weeks. Had another slight attack last summer. Has been “nervous” all her life. The least thing at home would worry her. She has had attacks in which she would cry and feel very much depressed. These attacks have been getting more severe and frequent, and since the birth of her child three years ago she has been very weak. The least thing would upset her; she had a choking sensation in her throat and palpitation of the heart.

Present Illness.—Since January last she has had a choking in her throat whenever she was tired. She could not get her breath and became very weak. This became so bad that she had to go to bed. She has not been up since then. She has trouble with gas in her stomach and belching. Appetite is very poor, bowels constipated, and sleeps poorly. Any slight worry or sudden shock, such as arrival of friends, etc., will cause the choking sensation and insomnia and the gas in the stomach.

Physical Exam.—Patient is poorly nourished; color is poor; skin is soft and moist, especially of the palms of hands and soles of the feet. She has an anxious expression; she is continually moving her hand, fingers or head, such as wiping her forehead or mouth, brushing back her hair, etc., etc. While engaged in conversation she will move one or both legs in a jerky manner, and snap her fingers against her body. Pupils are dilated and react to light and accommodation. Tongue is slightly coated, mouth dry, teeth in good condition.

Chest fairly well developed, expansion good, and equal on both sides.

Lungs are clear throughout.

Heart—P. M. I. of apex beat is in 4th I. space, 2" inside nipple line; sounds are clear—first sound short and sharp. Action of heart fast, but regular. First sound in pulmonic area is slightly roughened.

Abdomen is flat; walls are somewhat rigid. Stomach is distended with gas; its lower border 1" above umbilicus, the fundus reaching up to fifth rib in ant. axillary line. Spleen and liver cannot be felt. There is no tenderness on palpating abdomen.

Knee jerk. + +

Ankle clonus —

Babinski's. —

Plantar reflex—slight.

There is no disturbance of sensation, except over lower part of spine, which she says is tender.

Mental Status.—The least thing, such as other patients talking in the room, worries her; she is afraid that she is not going to get better, and says that she is all upset. Any excitement causes nausea and a fainting feeling about the heart. She is worrying about her priest and thinks that she ought to go to confession. Her heart, she says, gives her distress, and she is sure that there is something wrong with it.

Exam. of Urine.—Negative.

June 10th.—She says that slightest exertion tires her, such as assisting the nurse with her hair, etc. She is easily excited, which causes attacks of smothering or vomiting.

June 23rd.—Patient is improving; says that she is resting better; the least exertion still causes exhaustion, and she is kept perfectly at rest, not being allowed to do the slightest thing for herself.

June 27th.—She is much better and more hopeful of her ultimate recovery. Says that she feels rested and “settled” as long as she keeps perfectly still.

July 14th.—She says that she was disturbed last night and afternoon by a young man passing her door. She is afraid that he is out of his mind, and may get into her room.

July 18th.—She is still worrying about the man, who, she imagines, is trying to get into her room. She cannot describe his appearance. She is menstruating.

July 19th.—To-day she is worrying about the man mentioned above, but wants to be moved to another ward, as she says hers is too expensive. She also fears she may have to have an operation, as a doctor told her so some time ago. She was relieved when told that she would not have one.

July 21st.—Patient is worrying a great deal—she has numerous delusions. She believes that people are talking about her all the time, and that she heard the nurses say they were getting everything ready for her operation. The nurses, she says, are angry with her and are putting nasty things in her food. She saw the priest to-day, and was quieter afterward. She is not taking her nourishment well.

July 22nd.—Still depressed and crying, and has more delusions. Says people are trying to choke her with a strap. She almost refuses to take nourishment.

July 26th.—Patient shows no improvement. She is quite quiet when alone, but eries when she is spoken to, saying that her husband is tired of paying for her ward. She still has the delusions mentioned above, but when spoken to and questioned on other subjects she talks quite rationally, although recalling dates, etc., is an evident strain.

Aug. 3rd.—Patient is never without delusions. She believes people are slandering her, and that she is to be hung. Every meal she says is her last. She is taking more nourishment.

Aug. 8th.—Discharged to-day, as nothing can be done for her in these wards.

I may add that after delusions were fully developed, and when I was satisfied that she was definitely insane, I advised her husband to remove her to the asylum. Although satisfied that everything possible had been done, his antipathy to placing her among the insane for treatment was so great that he took her to another hospital, from which, at the end of a month's further treatment, he was obliged to remove her to the asylum. I mention this fact to show how intense is the feeling against sending a near relative for treatment among the insane, which, on this account, is always deferred as long as possible. She remained insane for four months. The history on her second admission is as follows:

Admitted Sept. 1st, 1907. Discharged Oct. 21st, 1907.

Nervous System.—Subjective. Psychical.

For the last five years patient has been a very poor sleeper, but the last three months sleeplessness has been much increased. Would lie and toss about until tired, and then would get up and walk around until fatigue at last made her go to bed, and, perhaps, sleep. Never would sleep more than four hours a night. When feeling tired would always have a poorer night. Depression dates back four years. Was very much depressed when she came to nervous wards before. For the last three months she has been growing more depressed again. She thinks that it is caused by the *sudden* death of her sister about three months ago. Would feel as though she wished to be entirely alone. Was always brooding over trivial things. Patient seems to have no ambition to do anything. Is always tired and lacking in energy. Rest always made her feel better. She worried a great deal over not being able to look after her home and her little girl. At times, when changing her position, she sees specks as of insects on the walls, when she knows that in reality they are not there.

B. Somatic.—Headaches are very severe when she becomes excited or worried. Pain is in the frontal region, and in the vertex. Feels as though there were a constricting band encircling forehead and passing back to occiput. Also feels as though there were a tremendous load pressing upon her vertex from above. Used to be troubled greatly with flatulence and a heavy sensation, but during the last few days she has been free from these symptoms. On the least exertion, and at times when lying down endeavoring to sleep, her heart palpitates, beats fast and forcibly. Sometimes a peculiar sensation of emptiness is felt in region of the heart. Along with this there comes a choking sensation, as of a ball in her throat. At times has a sensation as of blood rushing to her head; also buzzing and ringing in the ears. Surface of body, and especially the back

of limbs, seem to become numb and cold. At times, also, there is a sensation as of something creeping over the surface of her body or beneath her scalp. During her former stay in hospital, these symptoms were greatly increased.

Objective.—Patient is bright and cerebation appears very rapid. Eyes are dull and continually moving. Expression is vacant. When alone patient lies in a cramped position, with her eyes usually covered.

Reflexes.—Patellar, equal; biceps, normal; triceps, normal; wrist, normal; ankle clonus, not present; Babinski's sign, not present.

Sensation.—Normal for heat and cold and pain.

Eyes.—Acuity of vision, normal; color-sense, normal; field of vision, normal; pupils, normal in size and equal, react to light and distance.

Other Cranial Nerves.—Normal.

Grip.—Left, 22; right, 41.

Sept. 4th.—Patient feels weak and is restless. She tosses a great deal when awake. Sleeps only fairly well.

Sept. 30th.—Patient is feeling stronger, is more restful, and is sleeping much better; is also more contented.

Oct. 21st.—Patient now sleeps well. Is cheerful by day, and cerebation is quite quick. Can remain out of bed all day, walking about, etc., without tiring greatly. No longer has any abnormal sensations or distress, except an occasional recurrence of the globus hystericus in throat when excited.

On Oct. 31st, 1907, this patient wrote: "I am feeling fine. Can eat and sleep well, and I weigh 142 lbs." (Weight on discharge 135 lbs.)

The next case (J. McE.) is interesting in that the boundary line of insanity was passed for *only* a few days, after which the patient improved and was discharged, recovered. I may add that she was admitted, first, to the main building of the hospital, where the diagnosis of Neurasthenia was made, and was later transferred to the nervous wards on July 22, 1906. Her history is as follows:

J. McE.—Female.

Complaint.—Feeling of weight in top of head. Inability to sleep. No appetite.

Duration.—Since 1st of March.

Family History.—F. l., age 63; rheumatic. M. l., age 63; very nervous. B. 3 l. and w. S. 4, 3 quite well; 1 delicate, stomach trouble.

Husband, age 33. Children, 5, all healthy; no miscarriages.

Personal History.—Occupation, at home, on a farm. Has always worked hard. Age, 31.

Previous Illnesses.—Diseases of childhood. Was always a delicate girl, but was much stronger after her marriage. Bronchitis two years ago. Was always quite well after first three months of pregnancy. Never went beyond 8 or 8 1-2 months. Made good

recovery after all confinements except the last, 18 months ago, when she became very nervous and melancholy. In January was laid up a week with weakness and bearing-down pains.

Present Illness.—Began in end of February or beginning of March. Fits of trembling would come on several times during the day and patient would faint, becoming quite unconscious for some minutes. This lasted about a week, after which patient felt weak, and several times a day would have feeling of pain in back of head. Lately has had a feeling of weight in top of head. Some days worse than others. Appetite has been very poor since last illness. Bowels regular. Patient has slept very badly since March 1st. Sleeplessness has been increasing until now she sleeps scarcely at all. Has lost weight perceptibly during past winter.

Physical Exam.—Thin, anaemic woman; fair complexion. Apparent age, about 30. Nervous and hysterical in type. Very melancholy—(see nervous system).

Respiratory System.—Chest walls thin; intercostal spaces marked; mammary glands atrophied; front inspection; some flattening in at infra-clav. region; expansion equal.

Palpation.—Expansion equal; vocal fremitus equal and normal.

Percussion.—Resonant throughout.

Nervous System.—1. Mental Condition—Morbidly worried about her condition; very despondent. Of fair intelligence. Hysterical, giving way to fits of crying and complaining of pain. Referred chiefly to pelvic region. 2. Special Senses—(1) Vision normal. (2) Hearing, right, watch 3 ft. from ear; left, 6 inches. (3) Taste and smell, normal. 3. Other Cranial Nerves—All normal. 4. Motor System—General emaciation; otherwise normal. 5. Sensation—Touch, normal; pain, certain areas on lower extremities show diminished appreciation of pain. Temperature, normal. Muscle-sense, normal. Ataxia, none.

Reflexes.—Tendon reflexes normal in upper area; somewhat increased in lower extremity. Epigastric and abdominal reflexes, no response. Plantar reflex, right, flexor.

Alimentary System.—Tongue, furred, white; teeth, molars in bad condition, mostly decayed down to roots; abdomen, walls thin, flat; irregular peristalsis; action can at times be seen and felt; just below umbilicus a pulsation is visible; liver and spleen not palpable; stomach not enlarged.

Genito-Urinary.—Menstruation has been regular since nursing child. (Gave up nursing in January.) Menses came on six weeks later. For last twice there was very little flow—last just a few hours; no discharge between periods; examination of urine, negative.

June 27th.—Patient sleeping well at nights. Appetite improved. Somewhat less despondent and complaining less of pain.

July 2nd.—Patient has been feeling well since 27th, but this morning had cramps in lower part of abdomen and vomited before breakfast. Took no breakfast.

July 22nd.—Patient transferred to nervous wards. She says that as a girl she was nervous and worried a great deal—was easily upset. At present she feels much depressed; say her memory is going. She is worrying about herself, but not about anything else. She fears that she has a displaced uterus, and that she is becoming insane.

July 27th.—Patient feels a little better, and seems brighter. She still has occasional crying spells. Complained to-day of a choking sensation.

July 29th.—Visited by her sister-in-law when she was much depressed. Later she was brighter, but complained of great pain in her head. She was much upset by the actions of an insane patient, who was in the ward for half an hour. She is rather stupid to-night.

July 30th.—Patient is much worse to-day. She complained of great pain in her head. She said she heard her sister calling. She seemed to only partly realize where she was. She answered some questions sensibly, but later she became quite delirious, thinking she was at home picking raspberries. She was crying because she said she kept the baby out in the sun too long, and it had a headache. Later she wiped the walls with her handkerchief, thinking she was housecleaning. She stopped crying when told that the baby's head was all right, but soon began again to worry about the baby. Does not take her nourishment very well.

July 31st.—Patient is quite insane. She will not talk sensibly, but wants to get up and houseclean. She pulled all the beds in the ward to pieces, and piled the furniture on the bedstead, evidently preparing the room to sweep. As she disturbed the other patients, she was moved to an isolation ward in the basement. She is now talking wildly and singing. She will listen to reason, going back to bed quietly, but getting up again in a few minutes. She is melancholic, worrying about the baby and the washing not being finished. She is not abusive nor destructive. Thyroid gland considerably enlarged.

Aug. 1st.—Patient is rational to-day. She seems dazed and is depressed, but talks sensibly and has no delusions.

Aug. 2nd.—She complained of her room being dull, so was moved upstairs. She is considerably improved. She is in an isolation ward. Swelling of thyroid gland is decreasing.

Aug. 4th.—Still rather quiet, but is brighter than she was. She says she feels better. She does not remember her attack of July 31st, except in a dazed way. She does not know that she had delusions, but knows she was ill.

Aug. 7th.—Patient more cheerful than she has been since admittance. She laughs at times, and says she is getting better. She is not worrying to go home as she was.

Aug. 8th.—Visited to-day by her husband. She was delighted to see him, and very bright, both when he was with her and afterwards, when she was looking forward to his visit next day.

Aug. 10th.—A little depressed to-day, feeling homesick, but on the whole fairly bright, and looking forward to going home.

Aug. 12th.—Brighter to-day. She has a cough, and fears she is becoming consumptive. She says she was consumptive as a girl. Her right apex is a little flatter than the left, but there are no other signs of phthisis at present. Rather nervous and excited this evening.

Aug. 16th.—Patient allowed out on the balcony yesterday on a couch, and enjoyed it. She is depressed at times, but is cheerful as a rule. She had a fine twitching of her arms for an hour. Her facial expression is improving.

Aug. 25th.—Patient is gaining weight. Feels better, looks better, and is brighter. She is less often depressed than she was. She sleeps about 12 hours. She is now doing a little crochet work, and seems better for it.

Sept. 2nd.—Patient improving and gaining weight.

Sept. 4th.—Patient discharged to-day. Her pains have all disappeared. She sleeps well. Her appetite is good, and she is bright and happy. She is fatter than she has been for months. She is very well pleased with herself, and says she feels fit to take up her work at home again.

This patient reported herself "well" three months after she left the hospital. Duration of treatment in nervous wards, 6 weeks and 2 days.

The notes of July 29th, '06, in above case in regard to the actions of an insane patient for half an hour are of much interest, since it was undoubtedly the immediate cause of her condition on the following day.

The third case (M. M.) was one of very pronounced Neurasthenia. She applied for admission about May 1st, but as there was no vacancy, she was obliged to wait. As she was very urgently in need of treatment, I feared she might become insane before a vacancy occurred. She came several times to the hospital while awaiting admission, and on each visit her symptoms were more pronounced, and my anxiety about her mental condition greater. When the vacancy finally occurred on May 18th she was very near to the boundary line of insanity. The history is as follows:

M. M.—Female. Age 46. Admitted May 18th, 1907. Discharged Aug. 24th, 1907.

Complaint.—Depression of spirits; easily fatigued; feeling of weariness; irritability; worry; inability to sleep.

Family History.—F. living and well, 87 years of age; not nervous; a farmer, and has always enjoyed the best of health. M. dead; paralysis; 68 years. Was of a very nervous disposition, worried easily, and frequently took a despondent view of life. B., four; three alive and well, one dead, kidney trouble; none nervous; one had fits when a child. S., five, all alive and in good health; all more or less of a nervous disposition.

Personal History.—Age 46; occupation. housekeeping; no children; no miscarriages. Began to menstruate at about fourteen; always regular, and never suffered very much pain at her periods. As a child says she was not of a nervous disposition. Never had chorea or other nervous trouble. Says she was quite bright at school, but never applied herself closely to her studies. Always took a great deal of outdoor exercise. Is a farmer's wife. Married at 26. Says she has never worked hard; always has had a comparatively easy time.

Previous Illness.—Had influenza a number of times; otherwise quite healthy till present trouble developed.

Present Illness.—Patient says it began about one year ago, and she attributes it wholly to the fact that her husband was taken seriously ill with paralysis, and patient worried very much, thinking that he would not get better, as he was confined to his bed for about six months. Patient says she became exhausted by worrying and by the work in attending to her husband. The first symptom to make its appearance was weariness. Patient says she felt tired each morning on arising, and even though she rested during the day she still felt tired. Then insomnia developed. She began to worry about any small matter, and felt that she was surrounded by a multitude of troubles which she was unable to overcome. She frequently became depressed, and finally gave up all hopes of getting better. Patient became irritable, petulant and emotional—any small matter that called for mental exertion caused her temper to give way, and frequently caused her to cry. She began to feel that she was not capable of performing the duties which she was called upon to perform. She says she misconstrued remarks made by others, and felt that she was being made fun of when she heard anyone laughing or talking, and any remark that was made to her she took as a personal insult. Frequently when falling asleep she would jump in bed, or her arm or leg would suddenly jerk. Complains of a pricking sensation in the scalp, and sometimes a feeling of constriction about the head. Often when brushing her hair her head feels very tender in spots. Patient also complains of defective eyesight, and a sensation of burning in eyes, and of specks floating before her. Sometimes has a heavy feeling on top of head. Has no pain down spine or legs, but states that she feels weak. Complains of numbness in fingers. Complains that she is indifferent and lacks interest in anything she is doing; cannot concentrate her thoughts, and she is never surprised at anything, no matter how unexpected it may be. She takes everything as a matter of course—has become listless. Feels restless and has a desire to be on the move. Cannot content herself with being quiet, and feels the want of some outlet for her feelings. She has often felt that she is a burden to herself and her people, and that she would sooner be dead. Patient says that last fall her home was sold on account of her husband's health, and this brought her new worry and mental strain. Patient is sometimes troubled with indigestion and flatulence, sometimes ac-

accompanied by palpitation of the heart. Has gradually lost weight and strength, and recently has been troubled with a sinking, heavy feeling in the stomach.

Physical Examination.—Digestive—Tongue coated somewhat; teeth good; appetite fair; stomach normal in outline. Circulatory—Normal. Respiratory—Normal. Genito-Urinary—Normal. Nervous—Patient is decidedly emotional and easily irritated, but is a bright, intelligent woman. Reflexes—Biceps, normal; triceps, normal; patellar, somewhat exaggerated on each side; Babinski's, not obtained; ankle-clonus, not obtained; sensation, normal; examination of urine, negative.

May 19th.—Patient feeling quite irritable and despondent; thinks she will not get better.

May 22nd.—Condition about the same. Despondent and sometimes crying.

May 30th.—Feeling somewhat better and more cheerful.

June 1st.—Patient feels weakness in morning, and is somewhat depressed.

June 3rd.—Patient looks better and feels better. Throat is slightly sore, and seems to have a lump in it at times.

June 7th.—Throat somewhat sore. Is drowsy and sleeps well.

June 11th.—Patient depressed greatly from hearing a detailed and mournful statement of Miss M.'s about some friend of hers who was put in an asylum.

June 22nd.—Patient depressed at times, thinking of her father.

June 25th.—Patient quite bright and anxious to see her relatives.

July 1st.—Patient is quite bright and appears to be gaining every day.

July 12th.—Patient much discouraged and wants to go home. She thinks she is not improving. Complains of pain in abdomen.

July 20th.—Had a very poor night; is losing weight and not improving. Appetite is poor.

July 23rd.—During the last three nights patient has had long, refreshing sleep and is better.

July 27th.—Has slept very well during the last week, with exception of the last two nights. She is brighter and looks better than she did a week ago. Has gained 3 3-4 lbs. this week.

Aug. 2nd.—Patient doing well. Gained 2 1-4 lbs. this week.

Aug. 8th.—Patient sleeps and eats well, and is very cheerful.

Aug. 14th.—Patient cheerful and sleeping well. Gain in weight equals 2 1-2 lbs. this last week.

Aug. 24th.—Patient sleeps well, eats well and is bright. Wants to go home to her husband. Discharged. "Recovered."

Duration of treatment, 3 months and 6 days.

This patient was doing her household work and nursing her husband, who was still partially paralyzed, when last heard from, two months after leaving hospital.

I may add that in none of the cases quoted did the temperature, which was recorded two or more times daily, show any marked irregularities.

As stated above, these fifty patients all suffered from pronounced psychical symptoms, and the histories given were selected as fair examples to show the clinical symptoms, and in the first two cases the actual development of symptoms of insanity in patients suffering from Neurasthenia.

The conclusions to be drawn from the results of treatment in this class of cases are: (1) that insanity can be prevented in even a larger proportion of cases than was stated in my papers, which led to the establishment of these wards, since in this report not only those classed as "recovered," but also in those classed as "improved" was the immediate danger of insanity averted; and (2) that asylum treatment has been averted in a sufficient number of cases among the poor to already repay the Government for the money expended in these wards.

I am,

Yours very truly,

CAMPBELL MEYERS, M.D.

To the Medical Superintendent, The Toronto General Hospital:

DEAR SIR,—I beg to submit the report of the Department of Immunization and Medical Research for six months ending October 31, 1907:

The Department of Immunization and Medical Research was established in April, 1907, and has thus completed six months of its work. The primary object of its establishment was the practical application of the opsonic theory by means of inoculation with bacterial vaccines to suitable hospital cases, and the pursuit of research in medicine and surgery.

As concerns the application of this new therapy to hospital cases, 102 have been treated or are under treatment. The results, we submit, have been most gratifying, especially when it is considered that the great majority of our cases had failed to respond to the usual methods of treatment, and were consequently of long duration. In other words, many were practically hopeless in so far as surgical or medical intervention was concerned. A scrutiny of the subjoined lists of cases will reveal the fact that many have been either restored to health or greatly benefited.

It is scarcely necessary to say that the great amount of work entailed by the investigation and treatment of each case has rigidly limited the number, and, unfortunately, excluded many whose condition especially called for treatment by inoculation. We have, however, endeavored to select those cases which, either from long duration or from their severity or from failure to respond to the usual remedial measures, demanded the services of the department.

As concerns the diagnosis of disease, the resources of the department have been frequently called upon, especially in the diagnosis of tuberculosis by the so-called old-Tuberculin reaction, and by opsonic methods, and in the diagnosis of various blood conditions, such as septicæmia by blood-cultures, and of excess or deficiency of the salts of lime by other blood methods of investigation.

As concerns Research, three subjects have, in the main, received the attention of the department.

First: The opsonic theory and inoculation with bacterial vaccines. This investigation has proceeded, *pari passu*, with the study and treatment of the cases recorded below, and a number of facts which have advanced our knowledge of the practical, scientific, and technical sides of this subject have been discovered.

Second: The Content of the Blood in lime salts and the coagulation of the blood in relation to disease. Urticaria, weeping eczema, headaches, neuritis and neuralgia, thrombosis in typhoid

fever, and pruritus, have been studied with a view to the elucidation of the processes at work in these conditions, but especially with a view to the application of a rational therapy to their control. This has been done with success in many cases. Certain new facts concerning the pathology and treatment of severe pruritus have been discovered.

Third: The study of Diseases of the Heart by certain new methods of investigation. It is too early to speak of results in this work, and a year or two must elapse before the research will be able to yield anything of value.

The department has assiduously endeavored to disseminate a knowledge of its methods for combatting and elucidating the processes of disease in a three-fold manner.

First: Post-graduate students to the number of nine have received instruction by a laboratory course, by lectures, and by study of hospital cases. Two of these were from New Mexico, one from Tennessee, and one from California. The remainder were resident in Ontario.

Second: Meetings of the various medical societies and associations have been addressed at Detroit, at Washington, at Atlantic City, at Montreal, at Toronto; and at Chicago (by Dr. J. N. E. Brown).

Third: The results of the investigations and experience of the department have been given to the medical press.

TABLE I. ACNE.

Initial.	Disease.	Result.
N. C.	Severe Acne Vulgaris (Face).....	Much improved.
A. S.	Acne Vulgaris (Face)	No improvement.
L. H.	“ “ (Face)	Much improved
T.	“ “ (Face and Back)	Improved.
L. S.	“ “ (Face)	“
H.	“ “ (Forehead)	“
K.	“ “ (Face)	“
S.	“ “ (Face)	“
B.	“ “ (Face)	No improvement.
A.	Acne Indurata	Much improved.
A. M.	Acne Vulgaris	Improved.

Summary: Whilst some striking results have been obtained in the treatment of several severe cases, there has been a number that only improved to a certain point, and no further. Investigation of this subject is in progress.

TABLE II. BOILS AND CARBUNCLES.

Initial.	Disease.	Result.
H. P.	Boils	Cured Rapidly.
F. D.	Carbuncle	“ “
E. S.	Boils of long duration	“ “
W. B.	“ “ “	“ “
F.	Boils	“ “
R.	Boil	“ “
M.	Boils (severe)	Cured.
E. B.	Boils of long duration	Cured Rapidly.
S.	“ “ “	Much Improved.

A.	Boil	Cured Rapidly.
G. B.	Carbuncle and Boils	" "
G.	Boils	" "
G.	"	" "
W.	"	" "
W. N.	"	" "
G.	Carbuncle	Cured.
B.	Boils	Cured Rapidly.
R.	Boil of Ear	" "
W. (2)	Boil	" "
M. (2)	"	" "
S.	"	" "
S. (2)	Boils	" "
L.	Boils of long duration	" "
L. (2)	Carbuncle	" "
M. B.	Boil of Ear	" "
A. (2)	Carbuncle	Improved.
G. H.	Boils of long duration	Much Improved.
H.	Boils	Cured.
A. E.	Boils of long duration	" "
A. B.	Boils	Cured Rapidly.
W. W.	"	Much Improved.

Summary: The results of treatment of boils and carbuncles (33 cases) have been most gratifying. Many of these cases were severe and had resisted the usual methods of treatment. Control and cure were rapidly obtained in 27 cases of the 33, and a cure was ultimately obtained in the remaining six cases.

TABLE III. GONORRHOEA.

Initial.	Disease.	Result.
J.	Acute Gonorrhœa	Improved.
P.	" "	" "
X.	" "	" "
C.	Chronic "	No Improvement.
L.	Acute "	" "

Summary: No results of importance have yet been obtained in acute urethritis, notwithstanding the fact that brilliant results have occurred in gonorrhœal anthritis. The investigation is being continued.

TABLE IV. TUBERCULOSIS.

Initial.	Disease.	Result.
J. D.	Genito Urinary Tuberculosis; 3 years' duration; 2 operations.	Improved. 5 months' treatment.
M. P.	Tuberculosis of Glands of Neck; 2 1-2 years' duration; 1 operation; severe case.	Improved. 2 months' treatment.
W. B.	Tuberculosis of Glands of Neck; 4 years' duration; 3 operations.	Much improved. 1 year's treatment.
H. Y.	Tuberculosis of Kidney; 5 years.	Much improved. 6 months' treatment.
M. H.	Tuberculosis of Ureter; 3 years; operation.	No Change. 5 months' treatment.
L. B.	Tuberculosis of Bones of Foot and Ankle Joint.	Much improved. 5 months treatment.
H.	Tuberculosis of Glands of Neck; 8 months' duration; 2 operations.	Improved. 5 weeks' treatment.
V.	Tuberculosis of Glands of Neck; 15 years; 5 operations; very severe case.	Improved. 4 months' treatment.

F.	Tuberculous Peritonitis; 1 year's duration; 1 operation.	Much Improved; 3 months' treatment.
M. P.	Tuberculous Peritonitis; 2 years' duration; severe case.	Much Improved. 2 1-2 months' treatment.
W.H.	Tuberculosis of Bladder; 3 years' duration.	Much Improved. 5 months' treatment.
C. F.	Tuberculosis of Bladder and Kidney; 4 years' duration; severe case.	Bladder condition much improved after 4 1-2 mo's.
J. A.	Genito Urinary Tuberculosis; 1 year duration, but very severe; 2 operations.	Much improved after 5 months.
O.	Severe Pulmonary Tuberculosis; 5 years' duration.	No improvement after 4 months' treatment.
M. B.	Tuberculosis of Glands of Neck; 1 years' duration; moderately severe case.	Much improved after 4 1-2 months' treatment.
G. J.	Tuberculous Disease of Epididymis; 1 1-2 years' duration.	No Change. 2 months' treatment.
M. E.	Tuberculosis of a Wound; 1 year's duration; very serious case.	No Change after 7 weeks' treatment.
L.	Tuberculosis of Spine; 3 years' duration; 1 operation.	No Change after 3 weeks' treatment.
M.	Pulmonary Tuberculosis.	No Change after 2 weeks' treatment.
McB.	Tuberculosis of Glands of Neck; 2 years' duration; 2 operations.	No Change after 2 weeks' treatment.

Summary. In all, 20 cases of Tuberculosis have been treated or are under treatment; and the results which have been obtained even in so short a space of time as six months have but served to confirm our belief that appropriate inoculation with tubercle vaccine is the most powerful weapon available for combatting localized Tuberculosis. A scrutiny of the above list of cases will reveal certain facts; first, that all the cases except two were suffering from localized tuberculosis rather than pulmonary; second, that practically all were of long duration; third, that 15 out of these 20 cases had had one or more operations; fourth, that in 14 of these 15 cases useful surgical intervention was practically impossible; fifth, of these 18 cases of localized tuberculosis, 7 have been much improved, 6 improved, and 5 have been under treatment but a short time (no change is evident yet). Practically all are still under treatment.

As concerns Pulmonary Tuberculosis, our belief is that early or moderately early cases should prove amenable to inoculation, but that this treatment should be applied in conjunction with rest, open air, good food, etc. The department, having been thus encouraged, proposes to devote itself particularly to the treatment of Tuberculosis during the ensuing year.

TABLE V. SYCOSIS.

Initial.	Disease.	Result.
H. K.	Severe Sycois of long duration.....	Much Improved.
R. McK.	Severe " short "	Cured.
J. B.	" " long "	Much Improved.
C. E.	Sycois of long duration	Cured.

Summary: Three severe cases of long duration were controlled and practically cured with ease. Most striking results have thus been obtained in the treatment of this very intractable disease.

TABLE VI. DISEASES DUE TO OTHER MICRO-ORGANISMS.

Initial.	Disease.	Result.
McG.	Empyæma Sinus.	Improved.
G. H.	Blepharitis (Styes).	"
McK.	Seborrhœic Eczema.	"
McF.	Pustular Dermatitis.	Cured.
D.	Bacillus Coli Infection of Bladder and Kidney of long duration.	Much improved.
S. P.	Disease of Bladder of 4 years' duration.	" "
H.	Septic Hand and Arm; severe.	Rapidly cured.
B. W.	Ulcer of Mouth; severe.	Cured.
M. P.	Sinus Leading to Kidney.	Improved.
M. C.	Chronic Streptococcus Pyæmia (Chronic Blood Poisoning).	Cured.
E. H.	Chronically Discharging Wound of Abdomen.	Improved.
M.	Chronically Discharging Wound of Chest (Empyæma).	Cured in one week.
P.	Chronically Discharging Wound of Abdomen.	Improved.
A. H.	Chronically Discharging Wound of Chest (Empyæma).	Much improved.
B.	Blepharitis.	Improved.
O'B.	Infection of Nose.	Much improved.
L.	Universal Eczema.	No Change.
G. W.	Discharging Wound in Neck.	Cured.
A.	Chronic Eczema of Ear.	"
W. W.	Chronic Blepharitis (Styes).	"
H.	Chronic Disease of Ear (Otitis Media.	"
P. C.	Chronic Disease of Bones of Foot; very severe.	"
C. T.	Chronic Osteomyelitis (Blood Poisoning).	Under treatment.
J.	Chronic Disease of Bone.	" "
P. (2)	Wounds of Abdomen (after Peritonitis.	Improved.
F.	Wounds of Abdomen (after Peritonitis).	"
M. R.	Abscess Discharging Through Lung.	Cured.
D.	Disease of Bladder (B. Coli).	Improved.
M. W.	Felon.	Cured.

Summary: This table contains many of the most striking results that have been obtained. Several cases in which a successful issue has occurred might reasonably have been termed hopeless; while many others had proved most intractable.

In all five new conditions are contained in the above list that have been studied and treated successfully for the first time by this department—Seborrhœic Eczema, Ulceration of the Mouth, Blepharitis, Ulceration of the Nose and Frontal Sinusitis, and a case of Abscess discharging through the Bronchi.

The Department wishes to acknowledge the consideration shown it by the Board of Trustees and your unfailing sympathy and assistance, and the encouragement and co-operation of the members of the Hospital Staff, who have materially helped to make our results what they are by their advice in difficult cases, and by freely availing themselves of the resources of the Department in the application of this new instrument of therapy to the treatment of suitable cases.

Yours, etc.,

GEORGE W. ROSS.

Report of the Medical Registrar for 1906 and 1907

ACUTE INFECTIOUS DISEASES

DISEASE	In Hos'tal Oct. 1, '06		Admit'd during 1906-1907		Total	Cured		Reliev'd		I. S. Q.		Died		In Hos'tal Oct. 1, '07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Blastomycetes.....	...	...	1	...	1	...	...	...	...	...	...	1	...	...	...
Erysipelas.....	...	1	14	16	31	...	15	...	...	...	...	1	2	2	...
Febricula.....	...	4	1	5	6	...	3	1	...	...	...	1	...	...	...
Influenza.....	...	...	27	11	38	27	10	...	...	...	...	...	...	...	1
Malaria.....	...	...	2	...	2	...	2	...	...	...	...	...	...	...	...
Measles.....	...	1	1	2	3	1	1	...	...	...	...	...	...	...	...
Meningitis.....	1	...	5	3	8	...	...	2	...	...	...	4	3	...	...
Cerebro-Spinal.....	...	...	6	1	7	1	1	...	...	...	...	3	...	1	...
Tubercular.....	...	...	3	...	3	...	...	...	...	...	...	3	...	...	...
Otitis Media.....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Parotitis.....	...	1	1	2	3	...	1	...	...	...	...	...	...	...	...
Pneumonia.....	1	...	92	23	116	64	14	1	...	...	...	27	9	1	...
Rheumatic Fever.....	2	4	67	17	90	52	12	14	8	3	1	...	...	...	...
Rheumatism—Chronic.....	...	...	12	6	18	...	...	11	6	...	...	...	...	1	...
Muscular.....	...	...	3	...	3	1	...	2	...	...	...	...	...	...	...
Pleurodynia.....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lumbago.....	...	1	1	3	5	...	3	1	1	...	...	...	...	...	...
Sapremia.....	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...
Septicæmia.....	...	...	5	...	5	3	...	...	...	...	...	...	...	1	...
Puerperal.....	...	...	5	...	5	1	...	...	...	...	...	2	...	...	...
Syphilis.....	1	2	9	4	16	3	...	6	4	1	...	...	...	2	2
Typhoid.....	30	4	123	52	209	121	40	...	...	1	9	8	23	7	...
Tuberculosis.....	1	2	32	14	49	...	1	11	11	9	...	11	3	2	1
Pertussis.....	...	...	4	2	6	...	...	...	...	...	...	1	4	1	...
Miscellaneous.....	...	...	5	8	13	1	3	3	...	1	1	3	...	...	...
Total.....	36	14	418	167	635	290	101	55	34	13	3	61	31	35	12

CONSTITUTIONAL DISEASES

Alcoholism.....	1	...	132	15	148	...	...	120	15	9	...	4	...	...	...
Arthritis.....	...	...	6	2	8	1	1	5	1	...	...	...	...	...	...
Deformans.....	...	1	6	...	7	...	...	4	1	...	...	...	...	2	...
Debility.....	...	...	13	8	21	3	...	2	4	2	2	6	2	...	...
Diabetes—Insipidus.....	...	2	...	2	...	...	1	1	...	...	...	...	...	...	...
Mellitus.....	...	1	2	3	6	...	...	1	2	...	...	1	2	...	...
Gout.....	...	...	2	...	2	1	...	...	...	...	...	...	...	1	...
Poisons—Carbolic.....	...	...	2	1	3	1	1	...	...	...	...	1	...	...	...
Heroin.....	...	...	1	...	1	...	...	...	...	...	...	1	...	...	...
Lead.....	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Morphine.....	...	...	5	2	7	1	...	1	2	3	...	...	...	...	...
Gas.....	...	...	1	...	1	...	...	...	...	...	...	1	...	...	...
Arsenic.....	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Senility.....	...	...	2	1	3	...	...	1	...	...	...	...	1	1	...
Carcinomatosis.....	...	...	1	...	1	...	...	1	...	...	...	...	...	...	...
Total.....	1	2	177	32	212	9	2	136	25	15	2	14	4	4	1

REPORT OF THE MEDICAL REGISTRAR—Continued

DISEASES OF THE ALIMENTARY SYSTEM

DISEASE	In Hos'tal Oct. 1 '06		Admit'd during 1906-1907		Total	Cured		Reliev'd		I. S. Q.		Died		In Hos'tal Oct. 1, '07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Ascaris	1	...	1	1	...	...	...	...	...	...	...	...	...
Appendicitis	1	2	2	5	1	2	1	1	...	...	...	...	...	...
Cholangitis	1	...	1	1	...	...	1	...	...	...	...	...	...
Cholecystitis
Cholelithiasis	3	3	6	1	2	1	1	1	...	...	...	...	...
Colitis	4	...	4	2	...	2	...	...	...	...	...	...	...
Constipation	3	...	3	2	...	...	...	1	...	...	...	...	...
Diarrhoea	1	1	4	2	7	4	3	...	...	...	...	...	...	1	...
Dysentery	1	1	3	2	6	3	2	...	1	...	...	...	...	1	...
Emesis	3	3	...	...	...	2	...	...	...	...	...	1
Enteritis—Acute	1	...	...	1	...	...	...	...	...	...	...	1	...	...
Gastric Carcinoma	1	...	4	2	6	...	...	...	...	2	...	2	2	1	...
Ulcer	1	6	7	...	4	...	...	...	...	...	...	...	...
Gastritis—Acute	19	19	38	8	8	...	6	7	3	...	1	1	3
Chronic	2	1	...	...	...	...	...	...
Gastrectasis
Indigestion	7	1	8	2	...	4	1	1	...	...	...	...	...
Ileo-colitis	1	...	1	1	...	...	...	...	...	...	...	...	...
Intestinal Obstruction	2	...	2	1	...	...	...	...	...	1	...	...	...
Jaundice	3	1	4	2	1	...	1	...	...	...	...	...	...
Liver Abscess	1	...	1	...	...	...	...	...	...	...	...	...	...
Cirrhosis	5	...	5	...	...	2	...	...	...	1	...	2	...
Carcinoma	1	1	...	...	2	...	...	...	...	...	...	1	1	...	...
Oesophageal Carcinoma	1	...	1	...	...	1	...	...	...	...	...	...	...
Omentum	1	1	...	...	...	...	...	...	...	1	...	...
Peritonitis	2	1	3	...	1	...	...	...	...	2	...	...	...
Pharyngitis	1	1	...	1	...	...	...	...	...	...	...	...
Rectal Carcinoma	1	...	1	...	...	...	...	...	...	1	...	...	...
Varices	1	...	1	1	...	...	...	...	...	...	...	...	...
Sigmoid Carcinoma	1	...	...	...	...	...	...
Stomatitis	1	1	...	1	...	...	...	...	...	...	...	...
Tonsillitis	10	12	22	10	11	...	1	...	...	...	...	...	...
Toxæmia	1	2	5	5	13	5	6	...	...	...	...	...	...	1	1
Total	5	7	87	64	163	46	41	22	18	8	1	9	6	7	5

DISEASES OF THE RESPIRATORY SYSTEM

Asthma	1	2	9	2	14	...	...	8	4	...	...	2	...	...	...
Bronchitis	4	...	29	16	49	18	7	9	7	...	...	3	1	3	1
Broncho-Pneumonia .....	...	...	11	3	14	6	2	...	1	...	...	5	...	...	...
Emphysema .....	...	...	3	...	4	1	...	...	1	...	...	...	...	...	...
Epyæmia	1	...	...	...	...	...	...	2	...	...	...	1	...	...	...
Hæmoptysis .....	...	...	2	...	2	...	...	2	...	...	...	...	...	...	...
Nasal Catarrh .....	...	...	1	...	1	...	...	1	...	...	...	...	...	...	...
Laryngitis .....	...	...	1	...	1	...	...	1	...	...	...	...	...	...	...
Pleurisy	1	1	25	10	37	18	7	6	2	...	...	1	1	1	1
Pulmonary Abscess .....	...	...	...	1	1	...	...	...	1	...	...	...	...	...	...
Total	7	3	82	32	124	43	16	30	15	...	...	12	2	4	2

DISEASES OF THE CARDIO-VASCULAR SYSTEM

Aneurysm .....	...	...	5	...	5	...	...	2	...	1	...	2	...	...	...
Aortitis .....	...	...	1	...	1	...	...	1	...	...	...	...	...	...	...
Aortic Dilatation .....	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Endocarditis	1	1	34	16	52	1	1	14	7	3	...	12	5	5	4
Myocarditis .....	...	...	5	1	6	...	...	3	...	...	...	2	1	...	...
Pericarditis .....	...	...	...	1	1	...	...	...	...	...	...	...	1	...	...
Phlebitis	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Stenosis of Vein Cava	1	...	...	...	1	...	...	1	...	...	...	...	...	...	...
Total	3	1	46	18	68	2	1	21	7	4	...	17	7	5	4

REPORT OF THE MEDICAL REGISTRAR—Continued

DISEASES OF THE BLOOD AND GLANDS

DISEASE	In Hos'tal during Oct. 1, '06		Admit'd during 1906-1907		Total	Cured		Reliev'd		I. S. Q.		Died		In Hos'tal Oct. 1, '07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Anæmia	3	1	9	13	...	4	1	6	...	1	...	1	...	...
Chlorosis	1	1	...	1	...	...	...	...	...	...	...	...
Exophthalmic Goitre	4	4	...	...	...	4	...	...	...	...	...	...
Hodgkin's disease	1	...	1	...	...	...	...	...	...	1	...	...	...
Leukemia	2	...	2	...	...	2	...	...	...	...	...	...	...
Perniciou Anæmia	2	4	6	...	...	2	...	...	1	1	...	1	1
Tuberculous Glands	1	1	...	...	...	...	...	...	...	...	...	1
Total.....	...	3	6	19	28	...	5	3	12	...	2	2	1	1	2

DISEASES OF THE NERVOUS SYSTEM

Apoplexy .....	...	...	3	1	4	...	...	1	...	...	...	2	1	...	...
Aural Vertigo.....	...	...	1	1	2	...	...	1	1	...	...	...	...	...	...
Catalepsy.....	...	...	1	1	2	...	...	1	...	...	1	...	...	...	...
Cerebral—Abscess .....	...	...	...	1	1	...	...	...	...	...	...	...	1	...	...
Arterio-Sclerosis .....	...	...	2	1	3	...	...	...	...	...	1	...	...	...	...
Hæmorrhage .....	...	...	2	...	2	...	...	1	...	...	...	1	...	...	...
Concussion .....	...	...	3	...	3	...	...	...	...	1	...	...	...	...	...
Syphilis .....	...	...	...	3	3	...	...	...	...	...	...	...	1	...	...
Tumor.....	...	...	1	2	3	...	...	...	...	...	3	1	...	...	...
Chorea .....	...	...	2	...	2	...	...	2	...	...	...	...	...	...	...
Coccydynia .....	...	...	...	1	1	...	1	...	...	...	...	...	...	...	...
Diphtheritic Paralysis .....	...	...	...	1	1	...	...	1	...	...	...	...	...	...	...
Freidreich's disease .....	...	...	...	1	1	...	...	...	1	...	...	...	...	...	...
Epilepsy	1	...	14	6	21	10	3	5	2	...	...	...	...	...	1
Functional Paralysis .....	...	...	1	...	1	...	...	...	1	...	...	...	...	...	...
General Paralysis	1	...	...	...	1	...	...	...	1	...	...	...	...	...	...
Hæmatothachis .....	...	...	1	...	1	...	...	1	...	...	...	...	...	...	...
Hemiplegia	1	1	13	8	23	6	4	...	2	...	...	4	2	4	1
Headache .....	...	...	1	1	2	...	...	1	1	...	...	...	...	...	...
Hysteria	2	1	16	11	30	1	5	14	6	2	...	...	...	1	1
Insanity—General .....	...	...	10	11	21	...	...	4	4	4	5	...	...	2	2
Melancholia .....	...	...	2	3	5	...	...	...	1	2	2	...	...	...	...
Dementia .....	...	...	1	4	5	...	...	...	1	1	3	...	...	...	...
Dem. Præcox .....	...	...	2	1	3	...	...	...	2	1	...	...	...	...	...
Insomnia.....	...	...	2	...	2	1	...	1	...	...	...	...	...	...	...
Locomotor Ataxia	1	1	3	...	5	...	...	2	...	1	1	...	...	1	...
Migraine.....	...	...	...	1	1	...	...	...	...	...	1	...	...	...	...
Myelitis.....	...	...	1	...	1	...	...	...	...	...	...	1	...	...	...
Neuralgia .....	...	...	3	1	4	3	1	...	...	...	...	...	...	...	...
Neurasthenia	1	1	41	61	104	10	7	24	36	3	16	...	...	5	3
Cerebrasthenia .....	...	2	16	16	34	4	4	6	5	2	3	...	...	4	6
Optic Atrophy .....	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...
Neuritis	1	...	7	...	8	5	...	3	...	...	...	...	...	...	...
Neuralgia .....	...	...	1	1	2	1	1	...	...	...	...	...	...	...	...
Paralysis Agitans .....	...	...	1	1	2	...	...	1	...	...	...	1	...	...	...
P. M. A. ....	...	...	1	...	1	...	...	...	...	...	...	1	...	...	...
Sciatica .....	...	...	8	1	9	5	1	3	...	...	...	...	...	...	...
Spastic Paraplegia .....	...	...	1	1	2	...	1	1	...	...	...	...	...	...	...
Spinal Tumor .....	...	...	1	...	1	...	...	...	...	...	...	1	...	...	...
Total.....	9	6	166	138	318	48	28	74	61	21	35	13	6	18	14

REPORT OF THE MEDICAL REGISTRAR—Continued

DISEASES OF THE GENITO—URINARY SYSTEM

Disease	In Hos'tal Oct. 1, '06		Admit'd during 1906-1907		Total	Cured		Reliev'd		I. S. Q.		Died		In Hos'tal Oct. 1, '07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Abortion	19	19	...	19	...	...	...	...	...	...	...	...
Cystitis	3	1	4	1	...	1	1	...	...	1	...	...	...
Endometritis	4	4	...	4	...	...	...	...	...	...	...	...
Epididymitis	1	...	1	1	...	...	...	...	...	...	...	...	...
Gonorrhœa	6	1	7	3	1	2	...	...	...	...	...	1	...
Kidney Floating	1	1	...	...	...	...	1	...	...	...	...	...
Nephritis—Acute	2	14	5	21	1	2	6	1	...	...	...	5	6	2	...
Chronic	2	...	2	...	...	2	...	...	...	...	...	...	...	...
Enuresis	1	1	...	1	...	...	...	...	...	...	...	...
Ovaritis	1	1	...	1	...	...	...	...	...	...	...	...
Cellulitis	1	...	1	...	...	1	...	...	...	...	...	...	...
Puerperium	16	...	220	236	...	199	...	...	...	16	...	3	...	18	...
Septicæmia (extra)	2	2	...	1	...	...	...	...	2	...	...	...
Pyelonephritis	1	1	2	...	1	1	...	...	...	...	...	...	...
Orchitis	1	...	1	1	...	...	...	...	...	...	...	...	...
Uræmia	1	1	2	...	...	...	...	...	...	1	1	...	...
Renal Stone	1	...	1	1	...	...	...	...	...	...	...	...	...
Total	18	31	257	306	8	228	13	2	...	17	7	12	3	18

DISEASES OF THE SKIN

Acne .....	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Dermatitis .....	...	...	6	2	8	5	2	1	...	...	...	...	...	...	...
Eczema	2	...	6	3	11	4	2	3	1	...	...	...	...	1	...
Erythema .....	...	...	...	2	2	...	2	...	...	...	...	...	...	...	...
Herpes Zoster .....	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Impetigo .....	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Pediculosis .....	...	...	3	2	5	3	1	...	...	...	...	1	...	...	...
Pemphigus .....	...	...	...	3	3	...	3	...	...	...	...	...	...	...	...
Psoriasis .....	...	...	1	1	2	1	...	1	...	...	...	...	...	...	...
Rodent Ulcer .....	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Scabies .....	...	...	10	...	10	10	...	...	...	...	...	...	...	...	...
Sycosis .....	...	...	2	...	2	...	2	...	...	...	...	...	...	...	...
Tinea .....	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Ulcus .....	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Urticaria .....	...	...	1	1	2	...	1	1	...	...	...	...	...	...	...
Total	2	...	35	14	51	29	11	7	2	...	...	...	1	1	...

GRAND TOTAL

Infectious Diseases	36	14	468	167	635	290	101	55	34	13	3	61	31	35	12
Constitutional	1	2	177	32	212	9	2	136	25	15	2	14	4	4	1
Alimentary	5	7	87	64	163	46	41	22	18	8	1	9	6	7	5
Respiratory	7	3	82	32	124	43	16	30	15	...	...	12	2	4	2
Cardio. Vascular	3	1	46	18	68	2	1	21	7	4	...	17	7	5	4
Blood Glands .....	...	3	6	19	28	...	5	3	12	...	2	2	1	1	2
Nervous	9	6	165	138	318	48	28	74	61	21	35	13	6	18	14
Genito-Urinary .....	...	18	31	257	306	8	228	13	2	...	17	7	10	3	18
Cutaneous	2	...	35	14	51	29	11	7	2	...	...	...	1	1	...
Total	63	54	1047	741	1905	475	433	361	176	61	60	135	68	78	58

REPORT OF THE MEDICAL REGISTRAR—Continued

THE COMPLICATIONS OF THE PRINCIPAL DISEASES

DISEASE	COMPLICATION	Cured		Reliev'd		I. S. Q.		Died		Total	Per'centage
		M'	F.	M.	F.	M.	F.	M.	F.		
1. <i>Typhoid Fever</i>	Abortion.....	...	...	...	...	...	...	...	1	1	1
	Local Abscess.....	1	...	...	...	...	...	...	...	1	1
	Arthritis.....	1	...	...	...	...	...	...	...	1	1
	Broncho-pneumonia.....	1	...	...	...	...	...	...	...	1	1
	Cholecystitis.....	1	1	...	...	...	...	...	...	2	2
	Cholelithiasis.....	...	1	...	...	...	...	...	...	1	1
	Endocarditis.....	3	1	...	...	...	...	...	...	4	2
	Erysipelas.....	2	...	...	...	...	...	...	...	2	1
	Furunculosis.....	6	2	...	...	...	...	...	...	8	4
	Haemorrhage.....	12	1	...	...	...	...	2	5	20	10
	Influenza.....	...	1	...	...	...	...	...	...	1	1
	Jaundice.....	1	...	...	...	...	...	...	1	2	1
	Mania.....	1	1	...	...	...	...	...	...	2	2
	Meningitis.....	...	...	...	...	...	...	...	1	1	1
	Myocarditis.....	2	1	...	...	...	...	...	3	6	3
	Nephritis.....	...	1	...	...	...	...	...	...	1	1
	Neurasthenia.....	...	1	...	...	...	...	...	...	1	1
	Neuritis.....	1	1	...	...	...	...	...	...	2	2
	Orchitis.....	1	...	...	...	...	...	...	...	1	1
	Otitis Media.....	3	1	...	...	...	...	...	...	4	2
	Perforation.....	...	...	...	...	...	...	3	...	3	1
	Phlebitis.....	13	5	...	...	...	...	1	...	19	9
	Pleurisy.....	1	...	...	...	...	...	...	...	1	1
	Pneumonia.....	2	1	...	...	...	...	2	2	7	2
	Relapse.....	18	4	...	...	...	...	...	...	22	11
	Rupture Spleen.....	...	...	...	...	...	...	1	...	1	1
	Septicaemia.....	...	...	...	...	...	...	...	2	2	1
	Tonsillitis.....	1	...	...	...	...	...	...	...	1	1
	Tuberculosis.....	...	...	1	...	...	...	...	...	1	1
	Tympanic Perforation.....	2	...	...	...	...	...	...	...	2	1
	Vaginitis.....	...	1	...	...	...	...	...	...	1	1
Total Cases Typhoid 208		72	24	1	...	...	...	9	15	120	
Deaths—Percentage 8		96						24			
Several Complications may occur in one case, so no definite percentage is given.											
2. <i>Rheumatic Fever</i>	Chorea.....	...	1	...	...	...	...	...	...	1	...
	Endocarditis.....	9	2	15	3	...	...	...	...	29	33
	Insanity.....	1	...	...	...	...	...	...	...	1	...
	Pericarditis.....	1	...	...	...	...	...	...	...	1	...
	Pleurisy.....	1	...	...	...	...	...	...	...	1	...
Total Cases 89											
Deaths 0, Percentage 0											
3. <i>Pneumonia</i>	Abscess.....	3	...	...	...	...	...	...	...	3	...
	Appendicitis.....	1	...	...	...	...	...	...	...	1	...
	Cholecystitis.....	...	...	...	...	...	...	1	...	1	...
	Empyæma.....	...	...	1	...	...	...	1	...	2	...
	Endocarditis.....	1	...	...	...	...	...	...	...	1	...
	Erysipelas.....	...	...	...	...	...	...	1	...	1	...
	Exophthalmic Goitre.....	...	...	...	1	...	...	...	...	1	...
	Jaundice.....	...	...	...	...	...	...	...	1	1	...
	Meningitis.....	...	...	...	...	...	...	1	...	1	...
	Phlebitis.....	2	...	...	...	...	...	...	...	2	...
	Pleurisy (common to all)	...	...	...	...	...	...	...	...	...	...
	Pericarditis.....	2	...	...	...	...	...	...	...	2	...
	Pulmonary Embolus.....	1	...	...	...	...	...	1	...	1	...
	Retro-Bulbar Neuritis.....	1	1	...	...	...	...	...	...	1	...
Total Cases 116		1	1	...	...	...	...	...	...	2	...
Deaths 36, per'tage 42											
4. <i>Influenza</i>	Antrum Disease.....	1	...	...	...	...	...	...	...	1	...
	Endocarditis.....	2	1	...	...	...	...	...	...	3	...
	Erythema.....	...	1	...	...	...	...	...	...	1	...
	Haemoptysis.....	...	1	...	...	...	...	...	...	1	...
	Myocarditis.....	...	2	...	...	...	...	...	...	2	...
	Neurasthenia.....	1	1	...	...	...	...	...	...	2	...
5. <i>Erysipelas</i>	Tonsillitis.....	3	...	...	...	...	...	...	...	3	...
	Pneumonia.....	1	1	...	...	...	...	1	1	4	...
	Abscess.....	3	1	...	...	...	...	...	...	4	...

REPORT OF THE MEDICAL REGISTRAR—Continued

VALVULAR HEART DISEASE

OCCURRENCE	Cured, Relieved or Unrelieved		Died		Total
	M.	F.	M.	F.	
1. Primary Complaint	23	12	12	5	52
2. Complicating other Diseases	42	9	6	3	60
Total	65	21	18	8	112
CLASSIFICATION.					
1. Mitral Systolic	30	12	5	...	47
2. " Presystolic	1	4	...	2	7
3. Aortic Systolic	1	...	...	...	1
4. Aortic Diastolic	3	...	...	...	3
5. Aortic, double lesion	2	...	...	...	2
6. Mitral, double lesion .....	...	1	2	2	5
7. Aortic, with Mitral	4	...	...	...	4
8. Mitral, with Tricuspid	1	...	...	...	1
9. All valves affected .....	...	...	...	1	1
10. Not classified	23	5	11	3	41
Total	65	21	18	8	112

OBSTETRIC DIVISION

Special Report, 1906-07

	No.	Maternal Result		Infant Result	
		Lived	Died	Lived	Died
1. Diseases of Pregnancy.					
Cardiac Valvular Disease	4	3	1	3	1
Pericarditis	1	1	...	1	...
Tubercular Peritonitis	1	1	Transfer	1	...
Vomiting	2	1	Transfer	2	...
Gonorrhœa .....	...	...	...	...	...
Influenza	1	1	...	1	...
Syphilis	1	1	...	...	1
Typhoid	1	1	Transfer	1	...
Nephritis	1	1	...	1	...
Albuminuria	22	...	...	...	...
Perinephric Abscess	1	1	...	1	...
2. Labour.					
(a) Brow presentation	2	1	...	1	...
(b) Breech {	S. L. A.	1	1	1	...
	S. D. A.	1	1	1	...
	S. D. P.	1	1	1	...
(c) Transverse {	S. L. P.	3	2	1 Transfer	2 (Twins)
	2	1	1 Transfer	1	2
(d) Vertex {	L. O. A.	150	148	2	137
	R. O. A.	23	22	1	20
	R. O. P.	14	14	...	13
	L. O. P.	4	4	...	4
(e) Unclassified	1	...	...	...	...
3. Complications of Labour.					
(a) Contracted Pelvis	4	4	...	2	2
(b) Accidental Hemorrhage	1	1	...	1	...
(c) Post Partem Hemorrhage	2	2	...	2	...
(d) Placenta Adherent	3	2	1	2	1
(e) Placenta Prævia	1	1	...	1	...
(f) Prolapse Cord	1	1	...	...	1
4. Puerperal Complications.					
1. Puerperal Eclampsia	4	4	...	4	...
2. Acute Mastitis	1	1	...	1	...
3. Suppurative Mastitis	1	1	...	1	...
4. Sæpræmia	2	...	1 Transfer	1	...
5. Septicæmia	9	...	1 8 Tran'f'd	7	2
5. Infant.					
Males	109	...	...	97	12
Females	90	...	...	81	9
Cephalhematoma	5	...	...	...	...
Monstrosity	1	...	...	1	...
Obstetric Paralysis	1	...	...	...	1
Twin Birth	1	...	...	1	...
Congenital Cardiac	1	...	...	1	...
Hæmorrhage	1	...	...	1	...
6. Operations.					
Craniotomy	2	1	1	...	2
Episiotomy	6	42	...	6	...
Forceps—Delivery	44	...	2	40	4
Perineal Repair	33	...	...	...	...
Rotation	5	...	...	...	...
Trachelorrhaphy	3	...	...	...	...
Version {	Contracted Pelvis, 4 ..	8	...	4	4
	Eclampsia, 1				
	Transverse, 2				
	Placenta Prævia, 1 ...				
Vorhees Bag	2	2	...	1	1

* Transfer—Cases transferred to General Wards.

GOLDWIN W. HOWLAND, M.B., M.R.C.P. (LONDON)
Medical Registrar

Report of the Surgical Registrar

DISEASE	In Hos'tal Oct. 1, '06		Admit'd		Total	Cured or Reliev'd		Not bene- fited		Died		In Hos'tal Oct. 1, '07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.
Abortion.....	...	1	...	9	10	...	5	...	...	...	...	...	5
Abscess—Axillary.....	1	...	1	...	1	...	...	...	...	...	...
Inguinal.....	11	1	12	10	1	...	...	...	...	1	...
Ischio-rectal.....	2	3	5	1	3	...	...	...	...	1	...
Lachrymal.....	1	...	1	1	...	...	...	...	...	1	...
Mammary.....	1	1	...	1	...	...	...	...	...	...
Ovarian.....	1	1	...	1	...	...	...	...	...	...
Pelvic.....	...	1	...	3	4	...	4	...	...	...	...	...	...
Perinephritic.....	1	...	1	1	...	...	...	...	...	...	...
Prostatic.....	1	...	1	1	...	...	...	...	...	...	...
Psoas.....	1	...	5	1	7	5	...	...	1	1	...	...	...
Pulmonary.....	1	1	2	1	1	...	...	...	...	1	...
Subphrenic.....	3	...	3	2	...	...	...	...	...	...	...
Thyroid.....	1	1	...	1	...	...	...	...	...	...
Unclassified.....	2	...	16	7	25	18	7	...	...	...	...	...	...
Actinomycosis.....	1	...	1	...	1	...	...	...	...	...	...
Adenoids.....	6	4	10	6	4	...	...	...	...	...	...
Adenoma—Breast.....	1	1	2	...	1	...	...	...	...	...	...
Adhesions—Abdominal.....	4	4	...	2	...	2	...	...	...	...
Aneurysm—Radial.....	1	...	1	1	...	...	...	...	...	...	...
Ankylosis—Knee.....	2	...	2	1	...	1	...	...	...	...	...
Shoulder.....	1	...	1	1	...	...	...	...	...	...	...
Wrist.....	1	...	1	...	...	...	...	...	...	...	...
Appendicitis.....	12	8	146	110	276	145	110	...	...	2	1	11	7
Arthritis.....	3	1	4	2	...	...	...	...	1	1	...
Balanitis.....	1	...	1	1	...	...	...	...	...	...	...
Bedsore.....	1	1	...	1	...	...	...	...	...	...
Bite—Dog.....	1	1	...	1	...	...	...	...	...	...
Blepharitis.....	1	1	...	1	...	...	...	...	...	...
Blindness.....	3	...	3	2	...	1	...	...	...	...	...
Bunion.....	1	1	...	1	...	...	...	...	...	...
Burns and Scalds.....	12	...	11	8	31	22	3	...	...	5	1	...	...
Bursitis.....	4	4	4	...	...	...	...	...	...	...
Calculi—Biliary.....	2	...	5	13	20	5	13	1	...	...	1	...	...
Renal.....	10	4	14	9	4	...	...	1	...	...	...
Ureteral.....	1	...	1	1	...	...	...	...	...	...	...
Vesical.....	1	...	6	...	7	6	...	...	1	...	...	...	...
Carbuncle.....	2	...	2	1	...	...	1	...	...	...	...
Carcinoma—Bladder.....	2	...	2	...	...	...	2	...	...	...	...
Breast.....	1	2	1	27	31	23	1	...	1	2	...	4	...
Face.....	13	2	15	8	2	1	...	2	...	2	...
Glands, axillary.....	1	1	...	1	...	...	...	...	...	...
Glands, cervical.....	1	...	6	2	9	3	1	1	...	1	2	...	...
Glands, inguinal.....	1	1	2	...	1	...	1	...	...	...	...
Intestine.....	1	1	...	...	...	...	1	...	...	...
Jaw, lower.....	2	...	2	...	...	...	2	...	...	...	...
Jaw, upper.....	1	2	3	1	2	...	...	...	...	...	...
Liver.....	1	1	2	...	1	1	...	...	...	...	...
Esophagus.....	2	2	4	1	1	...	1	1	...	...	...
Omentum.....	1	1	...	...	...	...	1	...	...	...
Ovary.....	3	3	...	2	...	1	...	...	...	...
Pancreas.....	1	1	...	...	...	...	1	...	...	...
Rectum.....	2	1	3	4	10	2	3	2	1	...	1	1	...
Stomach.....	5	4	9	1	2	...	1	4	1	...	...
Thyroid.....	1	1	...	1	...	...	...	...	...	...
Tongue.....	2	...	2	2	...	...	...	...	...	...	...
Urethra.....	1	1	...	1	...	...	...	...	...	...
Uterus.....	...	2	...	18	20	...	13	...	4	...	3	...	...
Carious Tooth.....	1	1	2	1	1	...	...	...	...	...	...
Caruncle—Urethral.....	2	2	...	2	...	...	...	...	...	...
Cataract.....	1	2	34	20	57	28	19	1	1	...	...	6	2
Cellulitis—Head or Neck.....	1	...	1	...	...	...	1	...	...	...	...
Lower Limb.....	1	1	...	1	...	...	...	...	...	...
Pelvic.....	6	6	...	4	...	...	1	...	1	...
Upper Limb.....	2	2	...	1	...	...	...	...	...	1
Cholecystitis.....	...	1	3	4	8	3	2	...	...	...	...	...	3
Chondroma.....	1	...	1	...	...	...	...	...	1	...	...
Cleft palate.....	2	...	2	2	...	...	...	...	1	...	...
Coccydynia.....	2	2	...	2	...	...	...	...	...	...
Concussion of brain.....	1	1	...	1	...	...	...	...	...	...
Conjunctivitis.....	4	2	6	3	2	...	...	...	...	1	...

REPORT OF THE SURGICAL REGISTRAR—Continued

DISEASE	In Hos'tal Oct. 1 '06		Admit'd		Total	Cured or Reliev'd		Not Bene- fited		Died		In Hos'tal Oct. 1 '07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.
Contusion	1	4	5	1	4	...	...	...	...	...	...
Corn suppurating	1	...	1	...	...	...	...	...	...	1	...
Corneal opacity	2	1	3	2	1	...	...	...	...	...	...
Cyst—
Baker's knee	1	1	...	1	...	...	...	...	...	...
Cerebellar	2	2	...	1	...	...	...	...	...	1
Dentigerous	1	...	2	1	4	3	1	...	...	...	...	...	...
Lachrymal	2	3	5	2	3	...	...	...	...	...	...
Mammary	3	3	...	3	...	...	...	...	...	...
Ovarian	1	...	21	22	...	20	...	...	...	...	...	2
Sebaceous	3	2	5	3	2	...	...	...	...	...	...
Thyro-glossal	1	1	...	1	...	...	...	...	...	...
Cystitis	2	...	9	4	15	7	3	1	...	...	...	3	1
Dacryocystitis	2	2	...	2	...	...	...	...	...	...
Deflected nasi septum	7	...	7	7	...	...	...	...	...	...	...
Deformity—Nose	1	...	1	1	...	...	...	...	...	...	...
Dermoid	1	...	1	1	...	...	...	...	...	...	...
Diabetes	1	...	1	...	...	...	...	1	...	...	...
Diagnosis not made	12	9	21	...	11	9	...	...	...	1	...
Dilatation of Stomach—Acute	1	1	...	...	...	...	...	...	...	...
Dislocation—
Elbow	2	...	2	2	...	...	...	...	...	...	...
Hip	2	2	...	1	...	...	...	...	...	1
Knee	2	...	2	1	...	...	...	...	...	1	...
Lens	2	...	2	1	...	...	...	...	...	1	...
Semilunar cartilage	4	4	3	...	...	...	...	...	1	...
Shoulder	4	...	5	5	...	...	...	...	...	...	...
Ectopic gestation	9	9	...	6	...	...	1	...	...	2
Eczema	1	...	1	1	...	...	...	...	...	...	...
Edema, pharynx	1	...	1	1	...	...	...	...	...	...	...
Empyema—
Antrum	1	...	2	2	5	3	2	...	...	...	...	...	...
Frontal sinus	1	1	...	...	...	...	...	...	...	1
Pleural	1	...	7	3	11	8	3	...	...	...	...	...	...
Endometritis	1	...	36	37	...	34	...	...	...	...	...	3
Enteroptosis	1	1	...	...	...	...	...	...	...	1
Entropion	1	1	...	...	1	...	...	...	...	...
Epididymitis	3	...	3	3	...	...	...	...	...	...	...
Epilepsy	1	...	...	1	2	1	1	...	...	...	...	...	...
Episcleritis	1	...	1	1	...	...	...	...	...	...	...
Epithelioma—
Face	1	1	2	1	1	...	...	...	...	...	...
Lip	1	...	4	...	5	5	...	...	...	...	...	...	...
Nose	1	...	2	...	1	...	...	...	...	...	...
Erosion, Cervix uteri	1	1	...	...	1	...	...	...	...	...
Erysipelas	1	...	4	1	6	2	2	...	...	1	2	...	...
Exostosis, multiple	1	1	2	1	1	...	...	...	...	...	...
Extravasation of urine	4	...	4	3	...	...	...	1	...	...	...
Eye-strain	1	1	...	1	...	...	...	...	...	...
Fibroma—Mammary	3	3	...	3	...	...	...	...	...	...
Fibro-myoma, uterine	4	...	...	27	31	...	27	...	1	...	...	...	3
Fissure—Anal	1	3	4	1	1	...	...	...	...	...	2
Fistula—
Anal	7	1	8	7	1	...	...	...	...	...	...
Buccal	1	1	...	1	...	...	...	...	...	...
Facial	1	...	1	...	...	...	...	...	...	1	...
Recto-vaginal	2	2	...	1	...	...	...	...	...	1
Vesico-Vaginal	2	2	...	2	...	...	...	...	...	...
Foreign body in Eye	1	...	8	...	9	9	...	...	...	...	...	...	...
Elbow	1	1	...	...	1	...	...	...	...	...
Hand	3	3	...	1	...	2	...	...	...	...
Leg	1	1	...	1	...	...	...	...	...	...
Oesophagus	1	...	1	1	...	...	...	...	...	...	...
Fracture—
Clavicle	1	...	1	...	...	...	...	...	...	1	...
Femur	1	1	2	6	1	...	...	...	...	...	...
Elbow	1	...	9	3	13	9	2	...	...	1	1	...	...
Fibula	3	4	7	2	3	...	...	...	...	1	1
Fibula and Tibia	1	1	12	4	18	13	4	...	...	...	...	...	1
Humerus	2	...	6	...	8	7	...	...	...	...	...	1	...
Maxilla, Infr.	3	...	3	2	...	...	...	...	...	1	...
Maxilla, supr.	1	...	1	1	...	...	...	...	...	...	...
Nasal	4	...	4	4	...	...	...	...	...	...	...
Patella	4	...	4	4	...	...	...	...	...	...	...

REPORT OF THE SURGICAL REGISTRAR—Continued

DISEASE	In Hos'tal Oct. 1'05		Admit'd		Total	Cured or Reliev'd		Not Bene- fited		Died		In Hos'tal Oct. 1'07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.
Pelvis	1	...	...	...	1	1	...	...	...	...	...	...	...
Phalanx	...	...	1	...	1	1	...	...	...	...	...	...	...
Radius	1	...	4	1	6	4	1	...	...	...	...	1	...
Ribs	1	...	11	2	14	10	2	...	...	1	...	1	...
Skull, base	...	...	5	...	5	2	...	...	...	3	...	...	...
Skull, vault	...	...	4	1	5	3	...	...	...	...	...	1	1
Spine	...	...	2	...	2	...	...	...	...	2	...	...	...
Tarsus	...	...	1	1	2	1	1	...	...	...	...	...	...
Tibia	1	...	10	2	13	10	2	...	...	...	...	1	...
Frost-bite	...	...	2	...	2	2	...	...	...	...	...	...	...
Furunculosis	1	...	3	1	5	4	1	...	...	...	...	...	...
Ganglion	...	...	...	1	1	...	1	...	...	...	...	...	...
Gangrene—													
Arm	...	...	...	1	1	...	1	...	...	...	...	...	...
Fingers	...	...	1	...	1	1	...	...	...	...	...	...	...
Foot	...	...	1	...	1	1	...	...	...	...	...	...	...
Penis	...	...	1	...	1	1	...	...	...	...	...	...	...
Toes	...	...	1	...	1	1	...	...	...	...	...	...	...
Gastritis	...	...	2	1	3	2	1	...	...	...	...	...	...
Glaucoma	...	...	5	6	11	3	6	...	...	...	...	2	...
Goitre	...	1	6	14	21	4	14	...	...	2	...	...	1
Goitre, Exophthalmic	...	...	...	4	4	...	3	...	...	1	...	...	...
Gonorrhoea	1	1	32	8	42	31	7	...	...	...	...	2	2
Hæmatoma—Thigh	...	...	...	1	1	...	1	...	...	...	...	...	...
Ovarian	...	1	...	...	1	...	1	...	...	...	...	...	...
Hæmaturia	...	...	2	...	2	2	...	...	...	...	...	...	...
Hæmorrhage—Cerebral	...	...	1	...	1	...	...	...	...	1	...	...	...
Intraocular	...	...	1	...	1	...	1	...	...	...	...	...	...
Hæmorrhoids	...	...	22	9	31	19	8	1	...	...	...	2	1
Hallux Valgus	...	...	2	...	2	...	1	...	...	...	...	1	...
Hammer-toe	...	...	2	...	2	1	...	1	...	...	...	...	...
Hare-lip	...	...	1	1	2	1	1	...	...	...	...	...	...
Hernia—													
Femoral	...	...	...	2	2	...	2	...	...	...	...	...	...
strangulated	...	...	...	1	1	...	...	...	...	...	1	...	...
Inguinal	6	1	53	10	70	55	9	...	...	...	...	4	2
strangulated	1	...	6	2	9	2	2	...	...	4	...	1	...
Umbilical	...	...	...	2	2	...	1	...	1	...	...	...	...
Ventral	1	...	5	3	9	6	3	...	...	...	...	...	...
Hydrocele	...	...	...	7	7	7	...	...	...	...	...	...	...
Hydronephrosis	...	...	...	1	1	...	1	...	...	...	...	...	...
Hypospadias	...	...	1	...	1	1	...	...	...	...	...	...	...
Hyphemia	...	...	1	...	1	1	...	...	...	...	...	...	...
Hysteria	...	...	...	1	1	...	1	...	...	...	...	...	...
Impetigo	...	...	1	...	1	1	...	...	...	...	...	...	...
Incontinence of Urine	...	...	1	...	1	1	...	...	...	...	...	...	...
Infection—													
Foot	...	...	5	1	6	5	1	...	...	...	...	...	...
Hand	...	...	17	6	23	14	6	...	...	2	...	1	...
Ingrowing Toenail	...	...	...	2	2	...	1	...	...	...	...	...	1
Injury—													
Back	1	...	5	3	9	5	2	...	...	...	...	1	1
Elbow	...	...	2	...	2	2	...	...	...	...	...	...	...
Eye	4	...	32	4	40	34	3	1	...	...	...	1	1
Face	...	...	2	...	2	2	...	...	...	...	...	...	...
Foot	...	...	10	1	11	9	1	...	...	...	...	1	...
Hand	1	...	14	...	15	15	...	...	...	...	...	...	...
Head	...	...	1	...	2	1	1	...	...	...	...	...	...
Hip	...	...	...	1	1	...	...	1	...	...	...	...	...
Knee	...	...	1	...	1	1	...	...	...	...	...	...	...
Leg	...	...	9	2	11	8	1	...	...	...	...	1	1
Multiple	...	...	5	...	5	1	...	...	...	4	...	...	...
Shoulder	...	...	2	...	2	2	...	...	...	...	...	...	...
Unclassed	...	...	1	...	2	1	1	...	...	...	...	...	...
Intracranial pressure	...	...	...	1	1	...	1	...	...	...	...	...	...
Irido-cyclitis	2	1	2	1	6	3	1	1	1	...	...	...	...
Iritis	2	...	20	5	27	18	5	...	...	...	...	4	...
Keloid	...	...	1	...	1	1	...	...	...	...	...	...	...
Keratitis	1	1	18	3	23	18	4	...	...	...	...	1	...
Kerato-iritis	...	...	4	1	5	4	1	...	...	...	...	...	1
Kidney—Cystic	...	...	...	1	1	...	...	...	...	...	...	...	1
Movable	...	...	...	5	5	...	5	...	...	...	...	...	...

REPORT OF THE SURGICAL REGISTRAR—Continued

DISEASE	In Hos'tal Oct. 1 '06		Admit'd		Total	Cured or Reliev'd		Not Beue- fited		Died		In Hos'tal Oct. 1 '07	
	F.	M.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.
Laceration—Cervix uteri	12	12	...	12	...	...	...	...	...	...
Cervix, uteri, and per	...	1	...	5	6	...	6	...	...	...	...	...	...
Perineum	22	22	...	21	...	1	...	...	...	...
Leukæmia	1	1	...	...	...	...	...	...	...	1
Lipoma	1	4	5	1	4	...	...	...	...	...	...
Lymphadenitis—Cervical, tuberculo	17	15	32	17	15	...	...	...	...	...	...
Inguinal, simple	5	...	5	5	...	...	...	...	...	...	...
Lymphangitis	2	...	2	2	...	...	...	...	...	...	...
Mastitis	1	1	...	1	...	...	...	...	...	...
Mastoiditis	9	9	18	8	8	...	...	1	...	...	...
Meningocele	2	2	...	2	...	...	...	...	...	...
Menorrhagia	2	2	...	2	...	...	...	...	...	...
Menses, retained	3	3	...	3	...	...	...	...	...	...
Metrorrhagia	2	2	...	2	...	...	...	...	...	...
Navus	1	1	...	1	...	...	...	...	...	...
Nebula	2	...	2	2	...	...	...	...	...	...	...
Necrosis—
Femur	2	...	2	2	...	...	...	...	...	...	...
Maxilla, inferior	1	...	5	...	6	6	...	...	...	...	...	...	...
Phalanx	1	...	1	1	...	...	...	...	...	...	...
Metatarsus	1	...	3	...	4	4	...	...	...	...	...	...	...
Os Calcis	1	...	1	1	...	...	...	...	...	...	...
Rib	2	1	3	2	...	...	...	...	...	...	1
Skull	1	...	1	1	...	...	...	...	...	...	...
Sternum	1	...	1	1	...	...	...	...	...	...	...
Tibia	3	...	3	3	...	...	...	...	...	...	...
Neuralgia, Trigeminal	2	...	2	2	...	...	...	...	...	...	...
Neurasthenia	20	...	22	1	20	1	...	...	...	...	...
Neurofibroma	1	...	1	1	...	...	...	...	...	...	...
Obstruction—Pyloric	1	...	1	1	...	...	...	...	...	...	1
Intestinal	1	5	2	8	1	1	...	...	3	2	1	...	...
Odontoma	1	...	1	1	...	...	...	...	...	...	...
Ophthalmia—Gonorrhæal	1	...	...	...	1	1	...	...	...	...	...	...	...
Neonatorum	5	...	5	...	...	...	...	...	...	1	...
Sympathetic	1	2	7	3	2	...	...	...	...	2	...
Optic atrophy	1	...	1	1	...	...	...	...	...	...	...
Orchitis	6	...	6	6	...	...	...	...	...	...	...
Osteomyelitis—Femur	3	1	4	2	1	1	...	...	...	...	...
Maxilla	1	...	1	1	...	...	...	...	...	...	...
Otitis media	9	1	10	9	...	...	...	...	...	...	...
Ovaritis	1	...	1	2	2	...	...	...	...	...	...	...
Pancreatitis—Acute	1	...	1	1	...	...	...	...	...	...	...
Suppurative	1	...	1	1	...	...	...	...	...	...	...
Papilloma—
Bladder	1	...	1	1	...	...	...	...	...	...	...
Mouth	1	1	...	1	...	...	...	...	...	...
Penis	2	...	2	2	...	...	...	...	...	...	...
Rectum	1	...	1	1	...	...	...	...	...	...	...
Vulva	2	2	...	2	...	...	...	...	...	...
Paralysis—Arms	1	...	1	1	...	...	...	...	...	...	...
Parotid tumor	1	1	...	1	...	...	...	...	...	...
Perforation, typhoid	1	1	...	...	...	...	...	1	...	...
Periostitis	1	...	1	1	...	...	...	...	...	...	...
Pertontitis—
Diffuse	7	6	13	1	1	...	...	4	5	2	...
Pelvic	2	2	...	2	...	...	...	...	...	...
Phimosis	5	5	5	...	...	...	...	...	...	...	...
Phlebitis	1	...	1	1	...	...	...	...	...	...	...
Pneumonia	3	...	3	2	...	...	...	1	...	...	...
Polypus—
Aural	4	1	3	2	1	...	...	...	...	...	...
Nasal	1	...	...	...	2	1	1	...	...	...	...	...	...
Uterine	2	2	...	1	...	...	...	...	...	...
Prolapse—
Rectum	1	...	1	1	...	...	...	...	...	...	...
Uterine	5	5	...	5	...	...	...	...	...	...
Prostatic enlargement	2	...	20	...	22	12	...	...	...	7	...	3	...
Pterygium	2	...	2	2	...	...	...	...	...	...	...
Ptoxis	2	...	2	2	...	...	...	...	...	...	...
Prelitis	1	...	1	...	2	2	...	...	...	...	...	...	...
Pvonephrosis	1	3	4	...	3	...	...	1	...	...	...
Raynaud's Disease	2	2	...	2	...	...	...	...	...	...
Retained Placenta	1	1	...	1	...	...	...	...	...	...

REPORT OF THE SURGICAL REGISTRAR—Continued

DISEASE	In Hos'tal Oct. 1, '06		Admit'd		Total	Cured or Reliev'd		Not Bene- fited		Died		In Hos'tal Oct. 1, '07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.
Retinæ detached	...	...	1	...	1	1	...	...	...	...	...	...	...
Retroflexion of uterus	...	1	...	...	1	1	...	...	...	...	...	...	...
Retroversion of uterus	...	...	11	...	11	11	...	...	...	...	...	...	...
Rheumatism	...	1	...	...	1	1	...	...	...	...	...	...	...
Rhinitis, hypertrophic	...	4	...	...	4	4	...	...	...	...	...	...	...
Rodent ulcer	...	2	...	1	3	2	1	...	...	...	...	...	...
Rupture of urethra	...	2	...	...	2	1	...	...	...	...	1	...	...
Rupture of uterus	...	...	1	...	1	1	...	...	...	...	...	...	...
Salpingitis	...	1	...	28	29	...	24	...	...	1	...	4	...
Sarcoma—													
Arm	...	...	...	1	1	1	...	...	...	...	...	...	...
Eye	...	2	...	...	2	2	...	...	...	...	...	...	...
Face	...	1	...	...	1	1	...	...	...	...	...	...	...
Femur	...	...	1	...	1	1	...	...	...	...	...	...	...
Maxilla, superior	...	...	1	...	1	1	...	...	...	...	...	...	...
Naso-pharyngeal	...	1	...	...	1	1	...	...	...	...	...	...	...
Neck	...	1	...	...	1	1	...	...	...	...	...	...	...
Ovary	...	...	1	...	1	1	...	...	...	...	...	...	...
Thigh	...	...	1	...	1	1	...	...	...	...	...	...	...
Uterus	...	...	1	...	1	...	...	1	...	...	...	...	...
Sciatica	...	1	...	...	1	1	...	...	...	...	...	...	...
Senility	...	...	1	...	1	...	...	...	...	1	...	...	...
Septicæmia	...	1	4	5	...	2	...	...	1	2	...	...	...
Sinus	...	3	1	4	1	1	...	...	...	...	2	...	...
Spina bifida	...	...	2	2	4	2	1	...	...	1	...	...	...
Sprain—													
Ankle	...	...	10	2	12	10	2	...	...	...	...	...	...
Knee	...	1	...	...	1	1	...	...	...	...	...	...	...
Wrist	...	2	2	4	2	2	...	...	...	...	...	...	...
Strabismus	...	5	3	8	5	3	...	...	...	...	...	...	...
Stricture—													
Oesophagus	...	...	...	1	1	1	...	...	...	...	...	...	...
Rectum	...	...	1	...	1	...	...	...	...	...	...	...	...
Urethra	1	...	13	...	14	11	...	...	...	...	3	...	...
Synovitis—													
Knee	1	...	7	2	10	7	2	1	...	...	...	...	...
Shoulder	...	1	...	...	1	1	...	...	...	...	...	...	...
Syphilis	1	1	11	14	27	11	13	...	...	1	1	1	1
Talipes	...	1	2	3	1	2	...	...	...	...	...	...	...
Tenosynovitis	...	2	...	2	2	...	...	...	...	...	...	...	...
Testis—Imperfect descent	...	2	...	2	2	...	...	...	...	...	...	...	...
Tetanus	...	1	...	1	...	...	...	...	1	...	...	...	...
Tonsillitis	...	3	1	4	3	1	...	...	...	...	...	...	...
Tonsils, enlarged	...	7	10	17	7	10	...	...	...	...	...	...	...
Torticollis	...	1	...	1	1	...	...	...	...	...	...	...	...
Trachoma	...	...	4	...	...	3	...	...	...	...	...	1	...
Tuberculosis—													
Abscess	...	4	...	4	1	...	...	...	...	...	3	...	...
Bladder	1	...	2	...	3	1	...	1	...	...	...	...	...
Carpus	...	2	...	2	2	...	...	...	...	...	...	...	...
Elbow	...	...	1	...	1	1	...	...	...	...	...	...	...
Hip	5	...	4	5	14	8	2	1	1	...	...	2	...
Kidney	1	7	1	9	6	2	1	...	...	...	...	...	...
Knee	...	9	3	12	7	3	1	...	...	...	1	...	...
Peritonitis	...	1	2	2	5	...	2	1	...	...	2	...	...
Spine	1	3	6	10	3	5	...	...	...	...	1	1	...
Tarsus	...	1	1	2	4	1	2	...	...	...	...	1	...
Testis	1	...	10	...	11	10	...	...	...	...	1	...	...
Tibia	...	...	1	...	1	1	...	...	...	...	...	...	...
Tumor—													
Cerebral	...	...	1	...	1	1	...	...	...	...	...	...	...
Mediastinal	...	1	...	...	1	...	...	...	1	...	...	...	...
Unclassified	...	7	4	11	6	4	...	...	1	...	...	...	...
Ulcer—													
Corneal	1	...	9	...	10	10	...	...	...	...	...	...	...
Duodenal	...	3	...	...	3	3	...	...	...	...	...	...	...
Tongue	...	1	...	...	1	1	...	...	...	...	...	...	...
Unclassified	...	14	9	23	12	9	...	...	...	...	...	...	...
Varicose	1	3	2	7	14	2	10	...	...	...	1	...	...

REPORT OF THE SURGICAL REGISTRAR—Continued

DISEASE	In Hos'tal Oct. 1 '06		Admit't'd		Total	Cured or Reliev'd		Not Bene- fited		Died		In Hos'tal Oct. 1 '07	
	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.
Vesical .....	...	...	...	1	1	...	1	...	...	...	...	1	...
Uterus, infantile .....	...	...	...	1	1	...	...	...	1	...	...	...	...
Vaginismus .....	...	...	...	2	2	...	2	...	...	...	...	...	...
Varicocele	2	...	24	...	27	26	...	...	...	...	...	1	...
Varicose Veins	2	...	10	5	17	12	5	...	...	...	...	...	...
Vicarious Menstruation .....	...	...	1	1	...	...	...	...	...	...	...	...	1
Wax in Ear .....	...	...	...	1	1	...	1	...	...	...	...	...	...
Wounds—													
Arm .....	...	...	1	...	1	1	...	...	...	...	...	...	...
Bullet or gunshot	2	...	6	...	8	6	...	1	...	...	...	1	...
Face .....	...	...	5	1	6	5	...	...	...	...	...	...	1
Foot	1	...	1	...	2	2	...	...	...	...	...	...	...
Hand .....	...	...	2	...	2	2	...	...	...	...	...	...	...
Head	1	...	13	1	15	14	1	...	...	...	...	...	...
Thigh	1	...	1	...	2	2	...	...	...	...	...	...	...
Throat .....	...	...	3	...	3	1	...	...	2	...	...	...	...
Unclassified .....	...	...	4	1	5	3	1	...	...	...	...	1	1
	100	47	1212	868	2227	1106	767	39	34	69	38	98	75

Total Males 1,212

Total Femals 915

Total 2,227

Total deaths 107

Operations in General and Pavilion Operating Rooms

Oct. 1st., 1906-07

OPERATIONS	Cured or Relieved		Not Benefited		Died		Total
	M.	F.	M.	F.	M.	F.	
Abortion . . . . .	...	1	...	...	...	1	2
Abscess—							
Ichio-rectal	3	1	...	...	...	...	4
Pelvic . . . . .	...	4	...	...	...	...	4
Perinephritic	1	...	...	...	...	...	1
Psoas	9	2	...	...	...	...	11
Pulmonary . . . . .	...	1	...	...	...	...	1
Supphrenic	3	...	2	...	1	...	6
Unclassified	15	2	...	...	...	...	17
Adenectomy (lymph)—							
Cervical, carcinoma . . . . .	...	...	...	...	1	...	1
" tuberculosis	15	14	...	...	...	...	29
Inguinal, adenitis	4	...	...	...	...	...	4
" carcinoma . . . . .	...	1	...	...	...	...	1
Adenoma, Mammary . . . . .	...	1	...	...	...	...	1
Adhesions, abdominal . . . . .	...	1	...	...	...	...	1
Amputations—							
Arm . . . . .	...	...	...	...	1	...	1
Breast	1	26	...	...	...	1	28
Cervix uteri . . . . .	...	3	...	...	...	...	3
Fingers	10	1	...	...	...	...	11
Foot	1	1	...	...	...	...	2
Hand	3	...	...	...	...	...	3
Leg	7	...	...	...	...	...	7
Penis	2	...	...	...	...	...	2
Toes	2	1	...	...	...	...	3
Aneurysm	1	...	...	...	...	...	1
Antrum—Exploration	1	...	...	...	...	...	1
Appendicectomy	140	100	...	...	5	1	246
Arthrectomy	3	...	...	...	...	...	3
Arthrotomy	6	...	...	...	...	...	6
Brisement forcei—							
Elbow	3	1	...	...	...	...	4
Knee	1	...	...	...	...	...	1
Shoulder	1	...	...	...	...	...	1
Wrist	2	...	...	...	...	...	2
Bursectomy	3	1	...	...	...	...	4
Caruncle, urethral . . . . .	...	1	...	...	...	...	2
Cauterization . . . . .	...	2	...	...	...	...	2
Cholecystectomy	1	4	...	...	...	...	5
Cholecystotomy	5	10	...	...	2	1	18
Circumcision	10	...	...	...	...	...	10
Cleft palate	1	...	...	...	...	...	1
Contracture . . . . .	...	1	...	...	...	...	1
Curettement—							
Sinus	9	3	...	...	...	...	12
Uterus . . . . .	...	43	...	...	...	...	43
Cyst—Removal							
Dentigerous	3	1	...	...	...	...	4
Mammary . . . . .	...	1	...	...	...	...	1
Ovarian . . . . .	...	20	...	...	...	...	20
Sebaceous . . . . .	...	1	...	...	...	...	1
Cystoscopic Examination	3	...	6	2	...	...	8
Cystotomy, Suprapubic	3	...	...	...	1	...	4
Dislocation—Semi-lunar Cartilage	3	...	...	...	...	...	3
Shoulder	2	...	...	...	...	...	2
Ectopic gestation . . . . .	...	8	...	...	...	...	9
Empyema, frontal sinus . . . . .	...	...	...	...	...	...	1
Entero-enterostomy	1	1	...	...	...	...	2
Epithelioma—							
Ear	1	...	...	...	...	...	1
Face	4	1	...	...	...	...	5
Lip	4	...	...	...	...	...	4
Neck	4	1	...	...	...	1	6
Excision—							
Ankle	2	...	...	...	...	...	2

OPERATIONS IN GENERAL AND PAVILION OPERATING ROOMS

OPERATIONS	Cured or Relieved		Not Benefited		Died		Total
	M.	F.	M.	F.	M.	F.	
Coccyx .....	...	...	2	...	...	...	2
Elbow	2	...	1	...	...	...	3
Hip	1	...	...	...	...	...	1
Knee	3	...	...	...	...	...	3
Maxilla, inferior	2	1	...	...	...	...	3
" superior .....	...	2	...	...	...	...	2
Rectum .....	...	...	1	...	...	...	1
Ribs	10	...	...	...	3	...	13
Wrist .....	...	1	...	...	...	...	1
Exostosis—Removal	1	1	...	...	...	...	2
Extravasation of Urine	2	...	...	...	...	...	2
Examination under anæsthesia without operation	9	5	...	...	...	...	14
Fistula—							
Buccal .....	...	1	...	...	...	...	1
In ano	7	1	...	...	...	...	8
Recto-vaginal .....	...	2	...	...	...	...	2
Vesico-vaginal .....	...	2	...	...	...	...	2
Foreign body in œsophagus .....	...	...	...	...	...	...	...
Fracture—							
Elbow	2	...	...	...	...	...	2
Fibula	2	...	...	...	...	...	2
Femur	4	...	...	...	...	...	4
Humerus	4	...	...	...	...	...	4
Maxilla, superior	1	...	...	...	...	...	1
Patella	2	...	...	...	...	...	2
Radius	2	...	...	...	...	...	2
Skull-vault	1	...	...	...	...	...	1
Tibia	5	2	...	...	...	...	7
Ganglion—Wrist .....	...	1	...	...	...	...	1
Gastro-enterostomy	3	4	...	...	2	...	9
Gastrostomy	1	2	...	...	...	...	3
Hæmorrhoids	22	9	...	...	...	...	31
Hammer-toe	1	...	...	...	...	...	1
Hare-lip	1	1	...	...	...	...	2
Hernia—							
Femoral, strangulated .....	...	2	...	...	...	...	2
Femoral .....	...	1	...	...	...	...	1
Inguinal	53	11	...	...	...	...	64
Inguinal, strangulated	2	2	...	...	2	...	6
Umbilical .....	...	2	...	...	...	...	2
Ventral	5	3	...	...	...	...	8
Hydrocele	6	...	...	...	...	...	6
Hypospadias	2	...	...	...	...	...	2
Hysterectomy—Abdominal .....	...	27	...	...	...	...	27
Vaginal .....	...	2	...	...	...	1	3
Incision for sepsis	8	4	...	...	...	...	12
Ingrowing toenail .....	...	1	...	...	...	...	1
Laparotomy—Unclassified .....	...	...	2	4	1	3	10
Lipoma	1	4	...	...	...	...	5
Lithotomy, suprapubic	4	...	...	...	1	...	5
Mastoiditis	1	1	...	...	...	...	2
Meningocele .....	...	1	...	...	...	...	1
Myomectomy, uterine .....	...	2	...	...	...	...	2
Nævus .....	...	2	...	...	...	...	2
Needle in Elbow .....	...	1	...	1	...	...	2
" Foot .....	...	2	...	...	...	...	2
" Hand .....	...	1	...	1	...	...	2
Nephrectomy .....	...	4	...	...	...	...	4
Nephrolithotomy	3	2	...	...	...	...	5
Nephropexy .....	...	5	...	...	...	...	5
Nephrotomy	9	4	...	...	...	...	13
Neuroplasty	2	1	...	...	...	...	3
Neurectomy	1	...	...	...	...	...	1
Obstruction—Intestinal	1	...	...	...	3	1	5
Oophorectomy .....	...	6	...	...	...	...	6
Orchidectomy	13	...	...	...	...	...	13
Orchidopexy	1	...	...	...	...	...	1

OPERATIONS IN GENERAL AND PAVILION OPERATING ROOMS

DISEASE	Cured or Relieved		Not Benefited		Died		Total
	M.	F.	M.	F.	M.	F.	
Osteotomy	2	1	...	...	...	...	3
Papilloma—							
Vulva .....	...	2	...	...	...	...	2
Penis	1	...	...	...	...	...	1
Paracentesis—							
Abdomen	1	...	...	...	...	...	1
Thorax .....	...	1	...	...	...	...	1
Perforation—Intestinal, typhoid .....	...	...	...	...	1	1	2
Perineorrhaphy, for laceration alone or with prolapsus uteri .....	...	20	...	...	...	...	20
Plaster Paris	5	3	...	...	...	...	8
Plastic Operation—							
Abdomen .....	...	1	...	...	...	...	1
Face	1	...	...	...	...	...	1
Prolapse of rectum	1	...	...	...	...	...	1
Prostatectomy—							
Perineal	4	...	...	...	1	...	5
Suprapubic	4	...	...	...	2	...	6
Repair of Sphincter Ani	1	...	...	...	...	...	1
Rodent Ulcer	1	...	...	...	...	...	1
Rupture of Urethra	1	...	...	...	...	...	1
Rupture of Uterus .....	...	1	...	...	...	...	1
Salpingectomy .....	...	9	...	...	...	...	9
Salpingo-oophorectomy .....	...	21	...	...	1	...	22
Segregation of urine	1	1	...	...	...	...	2
Sequestrotomy	29	4	...	...	...	...	33
Skin grafting	4	1	...	...	...	...	5
Spina bifida	2	1	...	...	1	...	4
Stenosis of vagina .....	...	1	...	...	...	...	1
Stricture—Urethral							
Dilatation	3	...	...	...	...	...	3
Urethrotomy	8	...	...	...	...	...	8
Talipes	1	...	...	...	...	...	1
Tenoplasty	1	1	...	...	...	...	2
Tenotomy	2	1	...	...	...	...	3
Thyroidectomy	2	23	...	...	2	...	27
Trachelorrhaphy .....	...	15	...	...	...	...	15
Trachelorrhaphy and perineorrhaphy .....	...	5	...	...	...	...	5
Tracheotomy .....	...	1	...	...	...	...	1
Trephining	6	7	...	...	1	...	14
Tuberculous Abscess, unclassified	3	1	...	...	...	...	4
Tumor, parotid	1	1	...	...	...	...	2
Unclassified	15	13	...	...	...	...	28
Varicocele	25	...	...	...	...	...	25
Varicose Veins	7	5	...	...	...	...	12
Ventral fixation of uterus .....	...	4	...	...	...	...	4
suspension of uterus .....	...	10	...	...	...	...	10
Vaginismus .....	...	1	...	...	...	...	1
Wounds—							
Gunshot	4	...	...	...	1	...	5
Hand	1	...	...	...	...	...	1
Head .....	...	1	...	...	...	...	1
Throat	1	...	...	...	...	...	1
Unclassified	6	...	...	...	1	...	7
	634	544	12	10	29	16	1246

Total Males 675

Total Females 571

Total 1,246

Total Deaths 46

Operations in Eye and Ear Operating Rooms October 1st 1906-07

OPERATIONS	Males	Females	Total
Cataract—			
Extraction.....	11	11	22
Needling.....	12	5	17
Curetting frontal Sinus.....	...	1	1
Darrier's operation for Trachoma.....	1	...	1
De Wecker's Scissors Operation.....	...	1	1
Ectropion.....	...	1	1
Enucleation.....	20	7	27
Grattage, lid.....	1	...	1
Iridectomy.....	18	8	26
Mastoiditis.....	7	3	10
Mule's, Operation.....	...	1	1
Plastic.....	2	2	4
Polypus, aural.....	2	1	3
Pterygium.....	2	...	2
Sclerotomy.....	1	...	1
Sebaceous cyst.....	2	...	2
Steel in eye.....	1	...	1
Tenotomy.....	3	3	6
	83	44	127

Detailed Analysis of the Diseases or Ailments for which Patients received Treatment for the year ending 30th September 1907

DISEASE	Males	Females	Total
Ailmentary Canal			
Colitis.....	4	...	4
Constipation.....	5	...	5
Dysentery.....	5	3	8
Diarrhoea.....	4	3	7
Dyspepsia.....	8	1	9
Enteritis.....	1	1	2
Fistula-in-ona.....	7	1	8
Gastrodynia.....	...	...	...
Gastritis.....	31	23	54
Hæmorrhoids.....	23	9	32
Hæmatemesis.....	...	...	...
Intestinal Worms.....	1	...	1
Œsophagus (diseases of).....	1	2	3
Pharyngitis.....	1	1	2
Ptyalism.....	...	...	...
Peritonitis.....	16	17	33
Dilatation of Stomach (acute).....	1	...	1
Stomatitis.....	...	1	1
Tonsillitis.....	17	22	39
Cancer of Stomach.....	5	2	7
Ulceration of Stomach.....	1	6	7
Appendicitis.....	160	131	291
Cholangitis.....	...	1	1
Cholelithiasis.....	4	3	7
Rectal Cancer.....	1	1	2
Toxæmia Int.....	6	7	13
Brain and Nervous System			
Apoplexy.....	6	1	7
Chorea.....	2	...	2
Catalepsy.....	1	1	2
Concussion of brain.....	3	...	3
Spine.....	...	...	...
Compression of Brain.....	...	1	1
Spine.....	...	...	...
Delirium Tremens.....	...	...	...
Epilepsy.....	16	7	23
Hemiplegia.....	16	10	26
Hysteria.....	19	13	32
Inflammation of Brain.....	...	...	...
Insolation.....	...	...	...
Insomnia.....	2	...	2
Insanity.....	15	19	34
Locomotor Ataxia.....	4	1	5
Myelitis.....	2	...	2
Neuralgia.....	6	3	9
Neuritis.....	9	3	12
Paralysis, General.....	2	...	2
Paraplegia.....	3	2	5
Paralysis Agitans.....	1	1	2
Softening of the Brain.....	...	...	...
Spina Bifida.....	2	2	4
Sciatica.....	8	2	10
Neurasthenia.....	60	92	152
Spinal Curvature.....	...	...	...
Meningitis.....	15	4	19
Tetanus.....	1	...	1
Vertigo.....	1	1	2
Cerebral Abscess.....	...	1	1
Tumor.....	3	1	4
Syphilis.....	3	...	3
Bones			
Anchylosis.....	4	...	4
Caries.....	1	1	2
Exostosis.....	1	1	2
Necrosis.....	21	1	22

DETAILED ANALYSIS OF THE DISEASES OR AILMENTS FOR WHICH PATIENTS
RECEIVED TREATMENT FOR THE YEAR ENDING SEPT. 30.—*Continued*

DISEASE	Males	Females	Total
Bones—Continued			
Ostitis.....	7	2	9
Periostitis.....	1	...	1
Rickets.....	...	...	...
Arthritis.....	3	1	4
Synovitis.....	11	2	13
Circulation			
Angina.....	...	...	...
Aneurisms.....	6	...	6
Atheroma of Vessels.....	2	...	2
Cyanosis.....	...	...	...
Diseases of Aortic Valves.....	36	17	53
“ Mitral Valves.....			
“ Tricuspid Valves.....			
“ Pulmonary.....			
Endocarditis.....	...	...	...
Heart, Dilatation of.....	...	...	...
“ Hypertrophy.....	...	...	...
“ Degeneration.....	5	1	6
Nævus.....	...	...	...
Pericarditis.....	...	1	1
Phlebitis.....	2	...	2
Phlegmasia.....	...	6	...
Varicose Veins.....	12	6	18
Hæmatoma.....	...	2	2
Varicocele.....	26	...	26
Dislocations			
Ankle.....	...	...	...
Bones of the Hand.....	...	...	...
“ Foot.....	...	...	...
Clavical.....	...	...	...
Elbow.....	2	...	2
Femur.....	...	2	2
Humerus.....	5	...	5
Knee.....	2	...	2
Lower Maxilla.....	...	...	...
Patella.....	...	...	...
Wrist.....	...	...	...
Semi-lunar cartilage.....	4	...	4
Ear			
Cophosis.....	...	...	...
Otorrhœa.....	...	1	1
Otitis Media.....	9	1	10
Mastoiditis.....	9	9	18
Polypus.....	2	1	3
Eye			
Anaurosis.....	4	...	4
Amblyopia.....	...	1	1
Blepharospasmus.....	...	...	...
Cataract.....	35	22	57
Entropion.....	...	1	1
Ectropion.....	...	...	...
Foreign body in the Eye.....	9	...	9
Glaucoma.....	5	6	11
Iritis.....	26	7	33
Keratitis.....	25	6	31
Leucoma.....	...	...	...
Ophthalmia.....	...	...	...
“ Catarrhal.....	5	3	8
“ Purulent.....	5	2	7
“ Granular.....	...	4	4
“ Gonorrhœal.....	1	1	2
Pterygium.....	2	...	2
Retinitis.....	...	...	...
Scleritis.....	...	...	...
Staphyloma.....	...	...	...
Strabismus.....	5	3	8
Trichiasis Ciliarum.....	...	...	...
Ulcer of Cornea.....	12	...	12
Dacryocystitis.....	...	2	2
Injury, Eye.....	28	4	42
Hyphæmia.....	1	...	1

DETAILED ANALYSIS OF THE DISEASES OR AILMENTS FOR WHICH PATIENTS
RECEIVED TREATMENT FOR THE YEAR ENDING SEPT. 30.—Continued

DISEASE	Males	Females	Total
Fractures			
Bones of the Head and Face.....	16	1	17
" Hand	1	...	1
" Foot.....	1	1	2
" Pelvis.....	1	...	1
Clavical.....	1	...	1
Femur.....	10	3	13
Fibula.....	3	4	7
Humerus.....	8	...	8
Patella.....	4	...	4
Ribs.....	12	2	14
Radius.....	5	1	6
Scapula.....	...	...	...
Sternum.....	...	...	...
Tibia.....	11	2	13
Ulna.....	...	...	...
Vertebra.....	2	...	2
Fibula and Tibia.....	13	5	18
Liver			
Abscess of Liver.....	1	...	1
Acute Atrophy.....	...	...	...
Cirrhosis.....	5	...	5
Fatty Liver.....	...	...	...
Gall Stones.....	10	18	28
Hepatitis.....	...	...	...
Hydatids of Liver.....	...	...	...
Jaundice.....	3	1	4
Waxy Liver.....	...	...	...
Cancer Hepatic.....	1	1	2
Nose and Face			
Catarrh.....	5	...	5
Epulis.....	...	...	...
Epistaxis.....	...	...	...
Lycoma.....	...	...	...
Ozena.....	...	...	...
Polypus.....	1	1	2
Cleft palate.....	2	...	2
Deflected Septum.....	7	...	7
Deformity, nose.....	1	...	1
Hare lip.....	1	1	2
Poisons			
Gases.....	1	...	1
Irritant.....	1	...	1
Lead Poisoning.....	1	...	1
Narcotic.....	6	2	8
Narcoto-Irritant.....	2	1	2
Respiratory Organs			
Asthma.....	10	4	14
Bronchitis, Acute.....	33	16	49
" Chronic.....	...	...	...
Croup.....	...	...	...
Emphysema of Lung.....	1	...	1
Empyema.....	12	4	16
Hydrothorax.....	...	...	...
Pneumonia.....	96	23	119
" Pleuro.....	...	...	...
" Typho.....	...	...	...
" Broncho.....	11	3	14
Pleurisy.....	26	11	37
Phthisis.....	33	16	49
Pleurodynia.....	...	...	...
Tuberculosis.....	...	...	...
Hæmoptysis.....	2	...	2
Laryngitis.....	1	...	1
Spleen			
Splenitis.....	...	...	...
Waxy Spleen.....	...	...	...

DETAILED ANALYSIS OF THE DISEASES OR AILMENTS FOR WHICH PATIENTS
RECEIVED TREATMENT FOR THE YEAR ENDING SEPT. 30.—*Continued*

DISEASE	Males	Females	Total
Skin			
Acne	1	...	1
Boils	4	1	5
Burns and Scalds	23	8	31
Keloid	1	...	1
Nævus .....	...	1	1
Dermatitis	6	2	8
Carbuncle	2	...	2
Corns and Bunions	1	1	2
Elephantiasis .....	...	...	...
Eczema	9	3	12
Erythema .....	...	2	2
Frost Bites	2	...	2
Herpes	1	...	1
Impetigo	2	...	2
Intertrigo .....	...	...	...
Lupus .....	...	...	...
Lichen .....	...	...	...
Onychia .....	...	...	...
Pruritus .....	...	...	...
Pediculi	3	2	5
Pityriasis .....	...	...	...
Psoriasis	1	1	2
Roseola .....	...	...	...
Rupia	1	...	1
Ringworm .....	...	...	...
Scabies	10	...	10
Sycosis	2	...	2
Urticaria .....	...	...	...
Whitlow	1	1	2
Pemphigus .....	...	3	3
Rodent Ulcer	1	...	1
Ulcer	1	...	1
Ingrowing Toe-nail .....	...	2	2
Urinary Organs			
Bright's Disease, Acute .....	...	...	...
Chronic .....	...	...	...
Balanitis	1	...	1
Bubo .....	...	...	...
Cystitis	14	5	19
Condyloma .....	...	...	...
Diabetes Mellitus	3	4	7
Insipidus	2	...	2
Enlarged Prostate	22	...	22
Epididymitis	10	...	10
Gonorrhœa	39	10	49
Gleet .....	...	...	...
Hydrocele	7	...	7
Hæmatocele .....	...	...	...
Incontinence of Urine .....	...	...	...
Pyelitis	2	2	4
Phymosis	5	...	5
Paraphymosis .....	...	...	...
Retention of Urine .....	...	...	...
Nephritis	16	8	24
Stricture	16	...	16
Spermatorrhœa .....	...	...	...
Urinary Calculus	19	4	23
Kidney, Movable .....	...	6	6
Enuresis	1	1	2
Orchitis	1	...	1
Uræmia	1	1	2
Extravasation of Urine	4	...	4
Hæmaturia	2	...	2
Women			
Amenorrhœa .....	...	3	3
Abortion .....	...	30	30
Dysmenorrhœa .....	...	...	...
Erosion of Os Uteri .....	...	1	1
Fistula Recto-Vaginal .....	...	2	2
Vesico-Vaginal .....	...	2	2
Metritis and Endometritis .....	...	41	41
Menorrhagia .....	...	2	2

DETAILED ANALYSIS OF THE DISEASES OR AILMENTS FOR WHICH PATIENTS
RECEIVED TREATMENT FOR THE YEAR ENDING SEPT. 30.—*Continued*

DISEASE	Males	Females	Total
Women—Continued			
Ovarian Disease .....	...	1	1
Parturition .....	...	236	236
Premature Labour .....	...	...	...
Uterus, Anteversion of .....	...	3	3
“ Retroversion of .....	...	11	11
“ Ante flexion of .....	...	...	...
“ Retroflexion of .....	...	1	1
“ Inversion of .....	...	...	...
“ Prolapsus of .....	...	5	5
Womb, Polypus of .....	...	3	3
“ Fibroid of .....	...	31	31
“ Cancer of .....	...	20	20
Pelvic Cellulitis .....	...	6	6
Caruncle, Urethral .....	...	2	2
Ectopic Gestation .....	...	9	9
Zymotic and General			
Anæmia	4	17	21
Anasarca .....	...	...	...
Chicken Pox .....	...	...	...
Cholera, Asiatic .....	...	...	...
“ Morbus .....	...	...	...
“ Infantum .....	...	...	...
Chlorosis .....	...	1	1
Diphtheria .....	...	...	...
Dropsy .....	...	...	...
Erysipelas	18	19	37
Fever, Intermittent .....	...	...	...
“ Remittent .....	...	...	...
“ Scarlet .....	...	...	...
“ Pernicious .....	...	...	...
“ Typho-Malarial	2	...	2
“ Typhoid	153	56	209
“ Typhus .....	...	...	...
“ Cerebro-Spinal .....	...	...	...
“ Puerperal .....	...	6	6
“ Continued	4	1	5
Gout	2	...	2
Influenza	27	11	38
Leucocythemia	2	1	3
Measles	1	1	2
Mumps	1	1	2
Pyæmia, Septicæmia	7	4	11
Purpura .....	...	...	...
Rheumatism, Acute	69	21	90
“ Chronic	12	6	18
“ Gonorrhœal	1	...	1
“ Muscular	4	4	8
Scrofula	52	24	76
Syphilis, Primary	10	6	16
“ Secondary	12	15	27
“ Tertiary .....	...	...	...
“ Hereditary .....	...	...	...
Vaccination .....	...	...	...
Whooping Cough	4	2	6
Miscellaneous	5	8	13
Miscellaneous, not otherwise classed			
Abcess General	39	18	57
“ Psos	6	1	7
“ of Breast .....	...	1	1
Alcoholism	133	15	148
Amputations .....	...	...	...
Cancer, Epithelial	51	59	110
Melanotic .....	...	...	...
Contusions .....	...	...	...
Sarcoma	5	6	11
Cellulitis	2	3	5
Coxalgia	2	2	4
Debility	15	9	24
Gout	6	23	29
Gangrene	4	3	7
Gunshot Wounds .....	...	...	...
Hernia	72	21	93

DETAILED ANALYSIS OF THE DISEASES OR AILMENTS FOR WHICH PATIENTS
RECEIVED TREATMENT FOR THE YEAR ENDING SEPT. 30.—*Continued*

DISEASE	Males	Females	Total
Miscellaneous, not otherwise classed—Continued			
Injuries not otherwise classed.....	95	22	117
Sprains	13	4	17
Tumors—Fibroid .....	...	3	3
“ Fatty	1	4	5
“ Cartilaginous	1	...	1
“ Cystic	8	35	43
“ Other	16	13	29
Tetanus .....	...	...	...
Talipes	1	2	3
Ulcers	21	20	41
Blastomycetes	1	...	1
Arthritis	6	2	8
Rheumatoid Arthritis .....	...	...	...
Actinomycosis	1	...	1
Adenoids	6	4	10
Adenoma—Breast .....	...	1	1
Adhesions—Abdominal .....	...	4	4
Bedsore .....	...	1	1
Bite—Dog .....	...	1	1
Bursitis	4	...	4
Diagnosis not made	12	9	21
Empyema—Antrum	3	2	5
“ Frontal Sinuses .....	...	1	1
Enteroptosis .....	...	1	1
Fissure—Anal	1	3	4
Fistula—Buccal .....	...	1	1
“ Faecal	1	...	1
Ganglion .....	...	1	1
Hallux Valgus	2	...	2
Hammer Toe	2	...	2
Hydronephrosis .....	...	1	1
Hypospadias	1	...	1
Infection—Hand	17	6	23
“ Foot	5	1	6
Laceration—Cervix uteri .....	...	12	12
Laceration—Perineum .....	...	28	28
Lymphadenitis	24	15	39
Mastitis .....	...	1	1
Obstruction—Pyloric .....	...	1	1
“ Intestinal	5	3	8
Pancreatitis	2	...	2
Perforation, Typhoid .....	...	1	1
Prolapse—Rectum	1	...	1
Ptosis	2	...	2
Pyonephrosis	1	3	4
Salpingitis .....	...	29	29
Stricture—Rectum .....	...	1	1
Testis, Imperfect Descent	2	...	2
Torticollis	1	...	1
Total Males.....	2422		
Total Females.....		1710	
Total	4132		

List of Subscribers to the New Hospital Building Fund.

NAMES OF SUBSCRIBERS.	Amounts of Sub- scriptions	How Payable	Term
A. Ansley & Co.	\$500	5 yearly instalments	1906 to 1910
T. W. Baillie	5,000	5 " "	1906 to 1910
Walter J. Barr	500	5 " "	1906 to 1910
The Brown Bros., Limited	1,000	5 " "	1906 to 1910
George W. Booth	500	5 " "	1906 to 1910
Hon. George A. Cox	100,000	5 " "	1906 to 1910
F. C. Daniel	150	2 " "	1906 to 1907
Copp, Clark Co., Limited	1,000	5 " "	1906 to 1910
E. & S. Currie, Limited	500	5 " "	1906 to 1910
Fancy Goods Co. of Canada, Ltd.	1,000	5 " "	1906 to 1910
J. W. T. Fairweather	500	3 " "	1906 to 1908
J. W. Flavelle	25,000	5 " "	1906 to 1910
J. A. Fraser	25	1 " "	1906
H. H. Fndger	1,000	4 " "	1907 to 1910
W. H. Lockhart Gordon	100	2 " "	1906 to 1907
H. D. Gamble	100	3 " "	1906 to 1908
Goldsmiths' Stock Co. Limited	500	5 " "	1906 to 1910
G. Goulding & Sons	100	1 payment	On demand
Rev. Elmore Harris	100	2 yearly instalments	1906 to 1907
James Henderson	100	5 " "	1906 to 1910
G. A. Howell	500	1 payment	On demand
Mark H. Irish	5,000	5 yearly instalments	1906 to 1910
W. R. Johnston	1,000	5 " "	1906 to 1910
M. Langmuir Mfg. Co., Limited	10,000	5 " "	1906 to 1910
P. C. Larkin	10,000	5 instalments	
Z. A. Lash	500	5 yearly instalments	1906 to 1910
The Lowndes Co., Limited	100,000	Not stated	
Cawthra Mulock	100,000		
Estate of H. A. Massey	3,000	3 yearly instalments	1906 to 1908
W. D. Matthews	500	1 payment	On demand
Norman Macrae	100	5 yearly instalments	1906 to 1910
Allan F. Miller	5,000	3 " "	1906 to 1908
National Trust Co., Limited	5,000	5 " "	1906 to 1910
Frederic Nicholls	100	5 " "	1906 to 1910
W. R. Percival Parker	5,000	5 " "	1906 to 1910
Sir Henry M. Pellatt	300	3 yearly instalments	1907 to 1909
A. T. Reid	150	3 " "	1907 to 1909
R. B. Rice	2,500	5 " "	1906 to 1910
James Ryrie	2,500	5 " "	1906 to 1910
Harry Ryrie	1,000	5 " "	1907 to 1910
Rowell, Reid, Wilkie, Wood & Gibson	100	3 " "	1906 to 1908
Frank Sanderson	500	5 " "	1906 to 1910
James Scott	100	2 " "	1906 to 1908
Prof. and Mrs. W. H. Vander Smissen	10,000	5 " "	1906 to 1910
Byron E. Walker	100	1 payment	1906
Mr. and Mrs. R. Wickens	500	Cash.	
D. R. Wilkie	25,000	5 yearly instalments	1906 to 1910
E. R. Wood	100	1 payment	On demand
J. H. Wood	100	2 yearly instalments	1906 to 1907
A. W. Anglin	100	1 payment	On demand
James W. Baillie	100	5 yearly instalments	1906 to 1910
H. M. Blackburn	500	5 " "	1906 to 1910
S. H. Blake	100	1 payment	On demand
W. H. Blake	200	1 " "	
J. C. Breckenridge	100	5 yearly instalments	1906 to 1910
R. C. H. Cassels	500	5 " "	1906 to 1910
W. G. P. Cassels	500	5 " "	1906 to 1910
John Dick	50	5 " "	1906 to 1910
Elliott Manufacturing Co.	500	5 " "	1906 to 1910
E. W. Gillett Co., Limited	100	1 payment	On demand
Walter Gow	300	3 yearly instalments	1906 to 1908
Robert Greig	250	5 " "	1906 to 1910
George R. Hargraff	500	5 " "	1906 to 1910
G. T. Irving	100	2 " "	1906 to 1907
W. A. H. Kerr	250	5 " "	1906 to 1910
John B. Laidlaw	500	5 " "	1906 to 1910
Miller Lash			

LIST OF SUBSCRIBERS TO THE NEW HOSPITAL BUILDING FUND—Continued

NAMES OF SUBSCRIBERS.	Amount of Subscriptions	How Payable	Term
C. A. Larkin	\$300	3 yearly instalments	1906 to 1908
T. D. Law	100	1 payment	On demand
Mason & Shaw	150	2 yearly instalments	1906 to 1907
C. A. Moss	250	5 " "	1906 to 1910
Frank E. Maulson	25	1 payment	On demand
Proctor Bros.	50	" "	1906
Joseph B. Reed & Sons, Shaw & McNaught	300	3 yearly instalments	1906 to 1908
Rolph & Clark, Limited	1,000	5 " "	1906 to 1910
W. D. Ross	200	1 payment	On demand
J. M. Smith	200	2 yearly instalments	1906 to 1907
R. Holme Smith	250	3 " "	1906 to 1908
Smith & Mackenzie	125	5 " "	1906 to 1910
Toronto Lithographing Co., Limited	1,000	5 " "	1906 to 1910
H. L. Watt	500	5 " "	1907 to 1911
W. T. White	500	2 " "	1906 to 1907
Frank P. Wood	500	5 " "	1906 to 1910
C. W. J. Woodland	100	1 payment	On demand
Warwick Bros. & Rutter	1,000	2 yearly instalments	1906 to 1907
W. R. Wadsworth	100	2 " "	1906 to 1907
George Edwards	300	3 " "	1907 to 1909
W. L. Symons	100	1 payment	1907
John N. Lake	100	2 yearly instalments	1906 to 1907
Geo. Borgfeldt & Co.	500	5 " "	1906 to 1910
Wood, Gundy & Co.	500	5 " "	1906 to 1910
George R. Copping	300	3 " "	1907 to 1909
Stapleton Caldecott	100	3 " "	1906 to 1908
A. A. Allan & Co.	1,000	2 " "	" "
John Kay, Son & Co.	1,000	Not stated	" "
Perkins, Ince & Co.	500	5 yearly instalments	1906 to 1910
Joseph A. Thompson	150	5 " "	1906 to 1910
Walter Barwick	500	5 " "	1906 to 1910
Warren Bros. & Co., Limited	500	3 " "	1906 to 1908
Davis & Henderson	200	3 " "	1906 to 1908
James Lumbers	500	5 " "	1906 to 1910
John Sloan & Co., Limited	500	3 " "	1906 to 1908
Thomas Kinnear & Co.	500	3 " "	1906 to 1908
Ridout & Strickland	150	3 " "	1906 to 1908
Davidson & Hay, Limited	500	3 " "	1906 to 1908
F. W. Humphrey	250	5 " "	1906 to 1910
H. P. Eckart	500	2 " "	1906 to 1908
N. Ferrar Davidson	100	5 " "	1906 to 1910
Noel Marshall	300	5 " "	1907 to 1911
Noel Clifford Marshall	100	5 " "	1907 to 1911
K. R. Marshall	100	5 " "	1907 to 1911
Conger Coal Co., Limited	300	3 " "	1906 to 1908
Elliott & Son, Limited	100	1 " "	1906
A. F. Roger	300	3 " "	1906 to 1908
John Catto	500	5 " "	1906 to 1910
A. E. Webb	100	1 payment	On demand
John Stark & Co.	1,000	2 instalments	" "
G. Tower Fergusson	100	2 yearly instalments	1906 to 1907
A. Clubb & Sons	25	1 payment	On demand
John Lowden & Son	30	1 yearly instalment	1906
Nisbet & Auld	500	2 yearly instalments	1906 to 1907
Osborne & Francia	250	1 payment	On demand
Hugh N. Baird	200	2 yearly instalments	1906 to 1907
Medland & Jones	150	5 " "	1906 to 1910
Osler Wade	100	1 payment	On demand
M. Bachrack	50	Cash.	" "
W. A. Murray & Co., Limited	1,000	5 yearly instalments	1906 to 1910
Toronto Carpet M'fg Co., Limited	1,000	5 " "	1906 to 1910
John D. Ivey Co., Limited	500	5 " "	1906 to 1910
H. C. Tugwell & Co., Ltd.	150	3 " "	1907 to 1909
Edmund B. Osler	25,000	5 " "	1906 to 1910
John Leckie, Limited	100	1 " "	1906
Adams Furniture Co.	100	1 " "	1907
Alfred Wright	125	5 " "	1907 to 1911
Thomas Woodhouse	30	2 " "	1906 to 1907
I. D. Bradshaw Co.	100	3 " "	1906 to 1908
J. Coulter Co., Limited	150	3 " "	1908 to 1908
Robert F. Scott	100	1 " "	1907

LIST OF SUBSCRIBERS TO THE NEW HOSPITAL BUILDING FUND—*Continued*

NAMES OF SUBSCRIBERS.	Amount of Sub- scriptions	How Payable	Term
Roden Bros.	\$500	5 yearly instalments	1906 to 1910
W. T. Hogg	100	2 " "	1907 to 1908
F. H. Deacon & Co.	100	1 payment	On demand
W. Rennie Co., Limited	100	2 yearly instalments	1907 to 1908
R. J. Christie	2,500	5 " "	1906 to 1910
Albert Kleiser	100	1 " "	1906
S. Lorie	300	3 " "	1906 to 1908
Toronto Pharmacal Co.	150	5 " "	1906 to 1910
R. W. Spence	100	2 " "	1906 to 1907
Sidney Jones	50	1 " "	1907
Harry F. Wyatt	100	3 " "	1906 to 1908
T. G. Mason	1,000	5 " "	1906 to 1910
Firstbrook Box Co., Limited	500	5 " "	1906 to 1910
C. C. Dalton	500	5 " "	1906 to 1910
Witchall & Son	100	1 " "	1906
G. Duthie & Sons	100	3 " "	1907 to 1909
Wm. Davies Co., Limited	1,000	3 " "	1906 to 1908
S. B. Gundy	100	2 " "	1907 to 1908
W. A. Mitchell	250	2 " "	1906 to 1910
John Northway & Son, Limited	500	2 " "	1906 to 1907
Clarke & Clarke, Limited	500	2 " "	1907 to 1908
R. H. Verity	250	5 " "	1906 to 1910
Corticelli Silk Co.	100	1 " "	1906
Forbes Roofing Co.	100	3 " "	1906 to 1908
Nerlich & Co.	500	5 " "	1906 to 1910
D. D. Mann	10,000	5 " "	1906 to 1910
E. S. E. McConkey	100	2 " "	1906 to 1907
J. F. Brown Co., Limited	100	1 " "	1907
Estate of late George Gooderham	25,000	1 payment	On demand
Mrs. George Gooderham	1,000	1 " "	"
W. Lloyd Wood	250	5 yearly instalments	1906 to 1910
Paterson Manfg. Co., Limited	500	5 " "	1907 to 1911
The Ames Holden Co., Limited	500	5 " "	1906 to 1910
Gordon & Helliwell	50	3 " "	1906 to 1908
W. J. McWhinney	100	5 " "	1906 to 1910
A. M. M. Kirkpatrick	125	3 " "	1906 to 1908
A. Levy	50	2 " "	1906 to 1907
J. N. McKendry	50	2 " "	1906 to 1907
Park Bros.	25	1 " "	1907
Cameron & Campbell	20	1 " "	1906
Geo. W. Ferrier	25	5 " "	1907 to 1911
Laidlaw & Co.	200	1 payment	On demand
Daniel L. G. Rumpth	50	5 yearly instalments	1907 to 1911
Lawrence Solman	200	1 payment	On demand
T. N. Sampson	50	5 yearly instalments	1907 to 1911
Speight & Van Nostrand	100	4 " "	1907 to 1910
Bilton Bros.	100	4 " "	1907 to 1910
W. T. Pearce	25	5 " "	1907 to 1911
S. Tidy & Son	25	1 " "	1907
Canadian Kodak Co., Limited	250	5 " "	1906 to 1910
Kitchie & Ramsay, Ltd.	500	3 " "	1907 to 1909
W. Fountain, "My Valet"	25	1 " "	1907
W. H. Steel Co., Limited	25	1 " "	1907
George Marshall	25	5 " "	1907 to 1911
Copeland, Chatterson Co., Limited	500	5 " "	1906 to 1910
J. A. McKee	1,000	1 payment	On demand
R. Laidlaw Lumber Co.	500	3 instalments	"
W. D. Lummis	100	3 yearly instalments	1907 to 1909
W. A. Ellis	25	5 " "	1907 to 1911
Strachan Johnston	250	5 " "	1906 to 1910
J. H. Macdonald, K.C.	500	5 " "	1906 to 1910
D. E. Thomson, K.C.	500	5 " "	1906 to 1910
George F. Shepley, K.C.	500	5 " "	1906 to 1910
Fred. W. Niehouse	500	5 " "	1907 to 1911
J. A. Austin	25	5 " "	1907 to 1911
S. H. Knox & Co.	100	1 " "	1906
Alex. Lochore	30	3 " "	1907 to 1909
Frank Stollery	50	5 " "	1907 to 1911
George J. St. Leger	100	1 " "	1906
L. J. Applegath & Son	100	5 " "	1907 to 1911
Charles M. Henderson	30	3 " "	1906 to 1908
M. S. Brandon	10	1 " "	1907

Subscribers to New Hospital Building Fund

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LIST OF SUBSCRIBERS TO THE NEW HOSPITAL BUILDING FUND—Continued

Names of Subscribers.	Amounts of Subscriptions	How Payable	Term
Luxfer Prism or Expanded Metal Co.	\$100	1 payment	1907
Frank M. Gray	100	1 "	On demand
J. S. Playfair	100	1 "	"
D. S. Cassels	100	1 yearly instalment	1907
Booth Copper Co. of Toronto, Limited.	50	1 " "	1907
(Prof.) George M. Wrong	100	4 " "	1907 to 1910
A. Friend	50	1 " "	1907
R. Score & Son	100	4 " "	1907 to 1910
Henry A. Taylor	200	5 " "	1907 to 1911
Russell Hardware Co.	25	1 " "	1906
Joseph Kilgour	500	5 " "	1907 to 1910
Ontario Wind Engine and Pump Co.	100	2 " "	1906 to 1907
Jas. Morrison Brass Manufacturing Co.	200	5 " "	1906 to 1910
A. C. Rogers	100	1 " "	1906
Conduits Co., Limited	100	1 " "	1907
Harry Webb	300	3 " "	1907 to 1909
W. H. Laidley & Co., Limited.	300	3 " "	1907 to 1909
D. McCall Co., Limited	500	3 " "	1907 to 1909
Jas. Acton	200	2 " "	1906 to 1907
W. H. Pearson	200	3 " "	1906 to 1908
J. F. Hartz Co., Limited	100	1 payment	On demand
J. Henry Peters	100	5 yearly instalments	1906 to 1910
John Chambers	100	3 " "	1907 to 1909
C. S. MacInnes	100	4 " "	1906 to 1909
Samuel King	100	3 " "	1906 to 1908
Hon. James V. Teetzel	100	4 " "	1906 to 1909
The Steele-Briggs Co., Limited	500	2 " "	1906 to 1907
Edmund Bristol	1,000	5 " "	1906 to 1910
Duncan Bell	50	2 " "	1906 to 1907
Frederick Wyld	500	1 " "	1907
S. F. McKinnon & Co., Limited	500	5 " "	1907 to 1911
Office Staff, Wm. Davies Co., Limited, as follows:—			
F. J. Smale	150	3 " "	1906 to 1908
Albert F. Park	60	3 " "	"
J. A. Nelson	60	3 " "	"
John S. Porter	100	3 " "	"
W. W. Barrett	100	3 " "	"
L. C. Van Bever	60	3 " "	"
H. H. Smith	60	3 " "	"
H. A. Moffatt	30	3 " "	"
A. W. Smith	45	3 " "	"
J. R. Clark	30	3 " "	"
J. W. Cringan	30	3 " "	"
J. H. Barrett	75	3 " "	"
R. B. Park	30	3 " "	"
R. N. Watt	30	3 " "	"
P. Roberts	15	3 " "	"
J. A. Carstairs	25	1 payment	1901
William Beal	5	3 yearly instalments	1906 to 1908
Ladies of Head Office	22	1 payment	1906
"H. W."	5	1 "	1906
W. G. Stevens	10	3 yearly instalments	1906 to 1908
J. M. Huddart	10	3 " "	"
F. A. E. Hamilton	30	3 " "	"
W. H. Boddy	10	3 " "	"
J. F. Andrews	30	3 " "	"
F. D. Mitchell	9	3 " "	"
C. S. Dale	6	3 " "	"
W. P. Challes	9	3 " "	"
Ernest E. Nott	9	3 " "	"
A. H. Veitch	9	3 " "	"
A. R. Brown	15	3 " "	"
W. Melrose	10	1 payment	1906
W. G. Blair	9	3 yearly instalments	1906 to 1908
D. C. McCarthy	6	3 " "	"
J. R. Hyland	5	1 payment	1906
F. A. Morell	5	1 "	"
William White	5	1 "	"
C. H. Collard	1	1 "	"
W. Matthews	1	1 "	"
A. Smith	1	1 "	"

LIST OF SUBSCRIBERS TO THE NEW HOSPITAL BUILDING FUND—Continued.

NAMES OF SUBSCRIBERS.	Amounts of Sub- scriptions	How Payable	Term
<i>Office Staff, Wm. Davies Co. Limited.—</i>			
<i>Continued.</i>			
John Foames	\$1	1 payment	1906
C. Flaxmail	1	"	"
F. G. Chanter	1	"	"
P. Fobert	1	"	"
F. Pegg	5	1	"
J. Harvey	2	1	"
A. Collett	1	1	"
L. Colyer	2	1	"
F. Morris	2	1	"
C. Boyce	2	1	"
J. B. Thompson	1	1	"
E. G. Shelley	1	1	"
B. Hughes	5	1	"
W. Spink	2	1	"
Office Staff, Queen Street	4	1	"
James W. Atherton	10	1	"
Edwin Lodge	10	1	"
D. Harding	5	1	"
Queen Street Store Staff	6.10	1	"
F. Bettie	5	1	"
G. Teetart	1	1	"
B. Robinson	1	1	"
J. Crossin	1	1	"
M. Thompson	1	1	"
E. Sharpe	5	1	"
T. H. Cox	1	1	"
Miss Andrew	1	1	"
W. A. Frost	1	1	"
S. B. Herbert	5	1	"
George Dempster	10	1	"
A. G. Loatis	5	1	"
Kingsmill, Hellmuth Saunders & Tor- rance	1	1	"
T. H. Lee & Son Co., Limited	1,000	3 yearly instalments	1906 to 1908
Charles W. Kerr	500	5 " "	1906 to 1910
Toronto Hardware Mfg. Co.	100	4 " "	1906 to 1909
Oxley, Enos Co., Limited	250	5 " "	1907 to 1911
George Rathbone	25	1 payment	On demand
H. & A. Saunders	100	2 yearly instalments	1906 to 1907
C. Parsons & Son, Limited	250	5 " "	1906 to 1910
Masten, Starr & Spence	200	5 " "	1907 to 1911
Lawson & Wilson	500	5 " "	1906 to 1910
John McLean	25	1 " "	1906
John Watt	25	1 " "	1907
R. B. Hutchison	100	1 " "	1907
Canada Veiling Co.	50	3 " "	1906 to 1908
Joseph J. Follett	100	1 " "	1906
R. Cassels	100	1 " "	1907
Nordheimer Piano and Music Co.	500	5 " "	1906 to 1910
Bruce Manufacturing Co.	1,000	5 " "	1906 to 1910
George Reid	50	2 " "	1907 to 1908
Rogers Electric Co.	25	2 " "	1907 to 1908
Turnbull Elevator Mfg. Co.	25	1 " "	1907
Ralph King	25	1 " "	1907
Hough Lithographing Co.	75	3 " "	1907 to 1910
J. Jupp & Son	25	1 " "	1906
J. B. Smith & Sons, Limited	500	4 " "	1906 to 1909
William Neilson	100	3 " "	1907 to 1909
Henry Wright	100	1 payment	On demand
Marshall Sanitary Mattress Co.	25	1 " "	1907
The James Robertson Co., Limited	500	5 yearly instalments	1907 to 1911
Alfred W. Smith	100	" "	"
Alexander & Cable Lithographing Co.	50	5 " "	1907 to 1911
"A Friend," per John New	10	1 " "	1907
Hon. Chief Justice Charles Moss	500	5 " "	1906 to 1910
Hart & Riddell	200	5 " "	1907 to 1911
A. Miles and employees	5	1 payment	On demand
H. S. Mara	100	1 " "	"
J. C. Scott Co., Limited	500	3 yearly instalments	1907 to 1909
Holt, Renfrew & Co.	1,000	1 " "	1906

LIST OF SUBSCRIBERS TO THE NEW HOSPITAL BUILDING FUND—Continued.

NAMES OF SUBSCRIBERS.	Amounts of Sub- scriptions	How Payable	Term
Meyer Bros.	\$ 25	1 payment	On demand
Lever Bros., Limited	250	5 yearly instalments	1906 to 1910
John Alexander	25	1 payment	1907
F. McEachren	10	1 "	On demand
Fred. Armstrong	100	"	"
Hoidge & Sons	150	1 "	"
S. W. Black & Co.	25	1 yearly instalment	1907
George Shannessey	25	1 yearly instalment	1906
Elias Rogers	500	1 payment	On demand
G. A. Morrow	500	5 yearly instalments	1906 to 1910
Stauntons, Limited	250	5 "	1907 to 1911
Hume Blake	500	5 "	1907 to 1911
Fred. B. Featherstonhaugh	125	5 "	1907 to 1911
H. Williams & Co.	150	3 "	1907 to 1909
John J. Gartshore	50	2 "	1906 to 1907
W. G. Atkinson	100	2 "	1907 to 1908
Jenkins & Hardy	100	1 yearly instalment	1907
Charles Ciceri	20	1 "	1907
R. G. McLean	150	3 "	1907 to 1909
William B. Stewart	25	1 payment	On demand
T. Mortimer	25	1 payment	"
W. A. Hart, Jr.	25	1 yearly instalment	1907
Keith & Fitzsimons C.o Limited	100	1 payment	On demand
Muntz & Beatty	100	2 yearly instalments	1906 to 1907
C. H. Rust	100	3 "	1907 to 1909
Harton Walker	25	1 payment	On demand
Toronto Plate Glass Imp't'g Co.	150	5 yearly instalments	1907 to 1911
W. R. Phillips	25	1 "	1907
James C. Forman	100	1 "	1907
R. Wardrop	100	2 "	1907 to 1908
F. E. Phillips	100	4 "	1907 to 1910
Kerr, Davidson & Paterson	500	3 "	1906 to 1908
Walter Harland Smith	100	5 "	1907 to 1911
Hon. Sir Wm. R. Meredith	500	5 "	1907 to 1911
Wm. Tyrrell & Co.	50	1 "	1907
John Mackay	500	5 "	1907 to 1911
Empire Suspender Mfg. Co.	25	1 "	1907
R. S. Melndoe	105	3 "	1907 to 1909
J. A. Harrison	50	2 "	1907 to 1908
Covert Bros.	10	1 "	1908
Gurney Foundry Co., Limited	1,000	3 "	1907 to 1909
J. J. McLaughlin	250	2 "	1907 to 1908
Hon. Sir J. A. Boyd	200	"	1907
Hon. W. G. Falconbridge	200	"	1907
Timothy Eaton	50 000	Not stated	"
H. D. Warren	10,000	"	"
W. E. Rundle	350	4 yearly instalments	1907 to 1910
R. A. Rogers & Co.	25	Cash	"
Mrs. Walter S. Lee	100	"	"
C. S. Blackwell	500	"	"
Imperial Extract Co.	25	"	"
David Plewes	10	"	"
A. Kavanagh	10	"	"
D. O. Ellis	10	"	"
Wm. Junor	100	"	"
Rev. Peter Addison	5	"	"
A Methodist Minister, per Dr. W. H. Withrow	100	"	"
Bell Telephone Co.	500	"	"
Shea's Theater	100	"	"
Robert Armstrong	400	"	"
R. Parker	500	"	"
Massey Morrice	250	"	"
R. Bigley	10	"	"
J. J. Zoek & Co.	100	"	"
Crescent Concrete Paving Co.	25	"	"
C. Herendeen (Chicago)	100	"	"
A. W. Austin	500	"	"
Mrs. E. M. S. Baldwin	25	"	"
W. Laking, Lumber Co.	10	"	"
O'Keefe Brewing Co., Toronto	500	"	"
Ishikawa & Co.	50	"	"

LIST OF SUBSCRIBERS TO THE NEW HOSPITAL BUILDING FUND—*Continued.*

NAMES OF SUBSCRIBERS.	Amounts of Sub- scriptions	How Payable	Term
American Chiclé Co.	\$250	Cash	
Edmund Scheuer	50	"	
"A Friend," per Hugh Cameron & Co.	10	"	
Bredin Bread Co.	100	"	
George Weston	100	"	
H. L. Hime & Co.	50	"	
Employees of E. & S. Currie	6	"	
Miss Agnes Shields	100	"	
Thomas Urquhart	100	"	
Edward Adie	100	"	
James G. Ramsey	100	"	
David McGee	100	"	
W. B. Hamilton	2,000	"	
Dr. John Hoskin, K.C.	1,000	"	
Jesse S. Mills	25	"	
Dr. Fred Winnett	100	"	
Walter Gibson Cassels	500	"	
James McKenney	5	"	
John L. Blaikie	1,000	"	
J. Herbert Mason	500	"	
F. G. Osler	500	"	
Thomas West	25	"	
H. H. Williams	100	"	
Torrey-Alexander Mission	1,000	"	
Proceeds of Concert given by eight school girls	130	"	
Railway Mail Clerks of the Toronto Division	64	"	
Peleg Howland	200	"	
Thomas Robertson	100	"	
A. H. Campbell	500	"	
C. S. Gzowski	100	"	
Mrs. Goldwin Smith	1,000	"	
Brown and Love	500	"	
Telfer Manufacturing Co.	100	"	
E. Gegg	100	"	
M. & L. Samuel, Benjamin & Co.	500	"	
Wheaton & Co.	25	"	
Mr. and Mrs. W. Mortimer Clark	200	"	
"A Friend," for Hospital Fund, per Jno. B. Laidlaw	25	"	
A Friend	10	"	
M. A. Thomas	100	"	
Dr. Andrew Smith	500	"	
Dr. D. King Smith	500	"	
J. C. Black	500	"	
Alfred Jephcott	200	"	
W. G. Jaffray	100	"	
A. H. Campbell, Jr.	100	"	
A few guests of Elliot House	110	"	
A. Rosenthal	25	"	
P. A. Manning	100	"	
Captain Vennell	1	"	
George Coles, Limited	100	"	
Arthur Coleman	100	"	
C. V. M., from C. D. Massey	100	"	
Master Raymond Hart Massey	100	"	
"A Friend," from Mr. John Northway	100	"	
Wm. Crocker	100	"	
Leighton McCarthy, M.P.	100	"	
T. Sutherland Macklem	100	"	
Deptmental Mgrs. of Robt. Simpson Co.	125	"	
J. Gordon Jones	100	"	
H. Gordon McKenzie	25	"	
James P. McEvoy	100	"	
"An Humble Friend"	1	"	
Canadian Benevolent Order of Elks (contributed in 1905)	2,000	"	
Waltham Watch Co., Waltham, Mass.	250	"	
Hon. Justice Featherstone Osler	1,000	"	
Dominion Radiator Co.	1,000	"	

LIST OF SUBSCRIBERS TO THE NEW HOSPITAL BUILDING FUND—Continued.

NAMES OF SUBSCRIBERS.	Amounts of Sub- scriptions	How Payable	Term
Joseph Henderson	\$500	Cash	
Hon. A. B. Aylesworth	100	"	
J. W. Langmuir	100	"	
Alfred C. McConkey	25	"	
One who gave the Christmas-box just received from his employers	10	"	
H. D. Lockhart Gordon	100	"	
Thomas Ozilvie	250	"	
John H. Eyer	50	"	
A. E. Whinton	10	2 yearly instalments	
James H. Huty	10	2 " "	
J. J. Harpell	50	3 " "	
Thomas H. Cleghorn	100	2 " "	
SPECIAL GRANTS			
Government of Ontario, special grant directed by the Legislature to be paid by the University	250,000	.....
University of Toronto, special grant	50,000	.....
City of Toronto, special grant toward site	200,000	.....
Faculty of Medicine, University of Toronto	50,000	.....
County of York	15,000	.....
Total	\$1,219,765	10	

